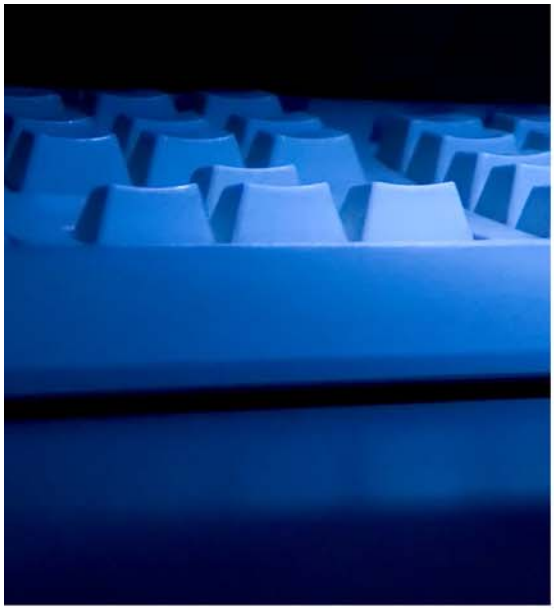
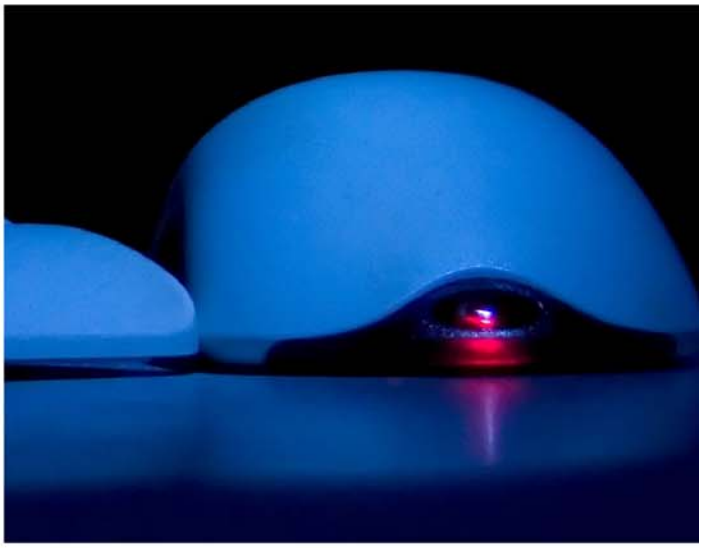


LTCSP User's Guide

11.9.1
User's Guide



Information in this user's guide is subject to change without notice.

All brand or product names are trade names, service marks, trademarks, or registered trademarks of their respective companies or organizations.

Systems Environment

Application Development: Microsoft Visual C++ and C# 2008 (9.0), .NET 3.51 SP1, .NET 4.6.1 or later (ASE-Q only)

Desktop Database (ASE-Q only): SQL Anywhere 11

CMS-supported operating systems and MS Internet Explorer versions are posted on the QTSO website at https://qtso.cms.gov/reference-and-manuals/minimum-system-requirements-home-health-agencies-hospice-providers-long-term, in the *Minimum and Recommended Client Requirements* PDF.

Oracle Database 12c Enterprise Edition Release 12.2.0.1.0

Oracle Client 12.2.0.0

Optional System Environments

MAPI Compliant E-mail client to support e-mail transfer of survey information

---

Note: This document can be viewed online or printed in a duplex (two-sided) format. Blank pages have been automatically inserted as needed for correct pagination in the printed copy.

Contents

Introduction **9**
About this User's Guide **9**
View and Navigate this Document Online 10
View a Printed Copy of this Document 11
Conventions 11
LTCSP CBTs **11**
Accessibility Features **12**
In this Guide 12
In the Application 12
LTCSP Procedures **13**
Import User Account File **13**
LTCSP Surveys **14**
Create LTCSP Survey Shell in ACO 14
Transfer LTCSP Surveys to ASE-Q 14
Open a Survey in LTCSP 17
LTCSP Screen Navigation and Features **19**
Title toolbar 19
Quick Access menu 19
Function toolbar 20
Change Column Order 20
Drop-down Lists 21
Hover 22
Expand/Collapse Sections 22
Resize Sections with Expander Bars 23
Update PDF Documents **23**
LTCSP Notes **24**
Surveyor Notes 26
Surveyor Notes in Resident Manager 26
Interview, Observations, and Record Review Notes 28
Facility Tasks Notes 28
View Resident Initial Pool Notes 28
View Surveyor Facility Task Notes 29
Medication Administration 30
Investigation Notes 30
View Body Map and Drawings for any Surveyor 31
Notes History 31

Reports and Attachments **33**
Generate Reports 33
Use the "Immediate Jeopardy Template" 35
Add Attachments 36

Data Sharing **39**
Open the Data Sharing screen 39
Share Data by USB/File 41
Share Data Via Email 42
Share Data Across a Network 43
Data Sharing for RO/CO Users 44
RO/CO Data Share Using USB/File 44
RO/CO Data Share Across a Network 46

Team Meeting **47**

Offsite Preparation **48**
Enter Offsite Prep Information 49
Active Complaint and FRI data 50
Complaints and FRIs Information during the Survey 52
Anonymous Complaints and FRIs 55

Entrance Conference **55**

Resident Manager **57**
Open the Resident Manager 58
Resident Manager views 58
Resident Manager Filter and Sort 59
Filter by group 60
Sort residents 60
Search Residents 61

Initial Pool **62**
Offsite Selected Residents 63
Include Resident in Initial Pool 64

Add/Update Residents **68**
Add a New Admission 68
Update Resident Information 70
Assign Subgroup to Resident 70

Surveyor Assignments **71**
Assign Surveyor to Resident 71
Change Surveyor Assignments 73
Unassign Surveyor 74
Manage Your Workload 75

Interview, Observations, and Record Review for Initial Pool Residents 76
Open Interview and Observations 76
Care Areas 77
Navigate Care Areas 79
Adding Care Areas on the Record Review screen 80
Probe Text 81
Assign Interview Status and Subgroup to Resident 81
Conduct Resident Interview (RI) 82

Conduct Resident Representative Interview (RRI) 83
Add an RRI after sample finalization 84
Conduct Resident Observation (RO) 85
Conduct a Limited Record Review (RR) 86
Determine Weight Loss/Gain 87
Mark an MDS Discrepancy 87
Mark a Significant Concern 88
Transfer Resident Data 88
Completed Screens 92

Finalize Sample 92
Open the Finalize Sample screen 93
Finalize Sample by Resident view 96
Finalize Sample by Care Area view 97
Finalize Sample Filter and Sort 98
Adjust Facility Census 98
Start Sample Finalization 99
Reset Sample Finalization 101
Modify Resident Care Areas 102
Add Residents to Sample 102
Remove Residents from Sample 103
Complete Sample Finalization 104

Balance the Survey Team's Workload 105

Closed Record Review Sample 107
Open the Closed Record Sample screen 107
Adjust the Closed Record Review Sample 108
Finalize the Closed Record Review Sample 109

Facility Tasks 109
Mandatory Facility Tasks 110
Triggered Facility Tasks 111
Open the Facility Tasks screen 112
Assign Facility Tasks 113
Initiate a Facility Task 113
Remove Facility Tasks 114
Open a Facility Task 115
Add/Remove Residents to/from Facility Tasks 118
Complete a Facility Task 119
Environment 120
Medication Administration 122
Determine Error Rate 122
Enter Med Admin Notes 124
Medication Storage and Labeling 127
Resident Council 127

Resident Investigations 130
Open the Investigations screen 130
Investigations Filter and Sort 132
Assign Investigations 133
Add Investigations 134
Remove Investigations 134
Open an Investigation 135

Investigation screen layout 136
Complete an Investigation 140
Transfer Investigation Answers to Another Resident 142
Complete a Closed Record Review 143
Initiate a Tag 143

Edit Potential Citation Documentation 146
Open Edit Potential Citation Doc 146

Potential Citations 148
Open Potential Citations 148
Filter the Tag Tree 150
View Potential Citation Information 150
Declare Citations 151
Cite a Tag 152
Citing an SQC Tag 153
Don't Cite a Tag 153

Modify the Sample List for the Facility 155
Add Residents to List 155

Load Cites 156
Load Cites into Citation Manager 156
Validation Issues 157
Extended Survey for SQC Citation 158

Generate Survey Documentation Reports in ACO 159

LTCSP Comparative Survey Procedures for ROs 161

LTCSP Comparative Surveys 161
Create the LTCSP Comparative Survey Shell in ARO 161
Transfer LTCSP Comparative Surveys to ASE-Q 165
Export the LTCSP Comparative and State Surveys 165
Import the LTCSP Comparative and State Surveys 166
Open an LTCSP Comparative Survey in LTCSP 168

LTCSP for LTCSP Comparative Surveys 168
Data Transferred from the State Survey 168
Data not transferred from the SA survey 169

Offsite Preparation 170

Resident Manager 174

Interview, Observations, and Record Review 176

Team Meeting 177
Team Meeting Day 1 178
Day 1 Questions and Response Explanations 178
Team Meeting Day 2 or Later 180
Day 2 or Later Questions and Response Explanations 180

Finalize Sample 181

Facility Tasks 185

Closed Record Sample 186

Investigations **187**

Potential Citations **188**

Finishing the LTCSP Comparative **188**
Compare RO to SA Tags 188
Federal Monitoring Survey Documentation Report 191
Federal Monitoring Survey Documentation Report 192

Supporting Materials **197**

Tips, Troubleshooting, Quick Reference **197**
Resident Manager Tips 197
Interview Status 199
Interview and Observations Tips 200
Sample Finalization Tips 201
Facility Tasks Tips 202
Non-mandatory Facility Task Triggers 203
Resident Investigations Tips 204
Potential Citations Tips 205
Citation Determination Tips 206
MDS Indicators 206
Care Area to RI/RO/RR Mapping 208
Record Review Rules 216
Care Area to Investigative Area Mapping 217

Data Sharing Checklists **220**
Checklist for Using USB Drive 220
Checklist for Using Wired Network 221
Checklist for Using Wireless Network 222

Keyboard Shortcuts **223**
Ease of Access Keyboard Shortcuts 223
Additional Ease of Access/Navigation Keyboard Shortcuts 223
Quick Access Menu Shortcuts 224
Notes Menu Bar 224
Surveyor Notes and Note Fields Shortcuts 226
General keyboard shortcuts 228
Dialog Box Keyboard Shortcuts 230

Introduction

The Long-Term Care Survey Process (LTCSP) application supports the survey process for long-term care facilities. The application lets you enter information electronically as you work through the survey process. For those acting as team coordinator (TC) for a given survey, the application provides extra functionality.

The software also includes the ability for RO teams to conduct LTCSP Comparative surveys. By linking the state survey to the LTCSP Comparative survey in ARO, the system will display information from the SA survey in the LTCSP Comparative survey for the RO team members to use during their survey. See "LTCSP Comparative Survey Procedures for ROs" for details.

About this User's Guide

The *LTCSP User's Guide* gives you the information you need to:

- Create and access a survey
- Use the LTCSP application to conduct the survey
- Manage citations
- Create and conduct an LTCSP Comparative survey

Note: This guide assumes that you are familiar with basic Windows operations and that you have attended training offered by your agency.

This guide consists of this introduction and the following two chapters:

1. **Procedures**

   Provides task-based procedures for using the LTCSP application.

2. **Supporting Materials**

   Contains supplemental information and reference items.

Note: For detailed information about the LTCSP process, refer to the *Long Term Care Survey Process (LTCSP) Procedure Guide* (**Navigation** menu | **Resources** | **Procedures Guide**).

View and Navigate this Document Online

You must have Adobe Reader installed to view this document online. You can download the latest version from https://get.adobe.com/reader/.

On any page, you can click the Increase (+) or Decrease (-) button in the toolbar to adjust the page magnification to your comfort level. Use the bookmarks in the left pane of Adobe Reader to locate and go (click the bookmark) to relevant information in this User's Guide.

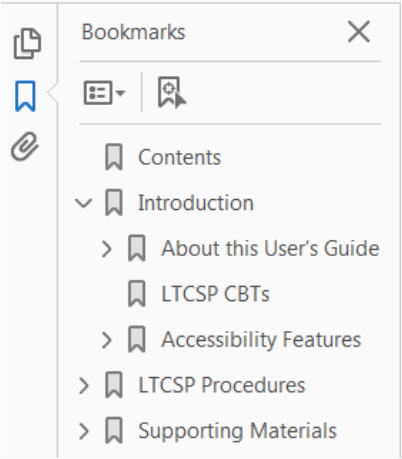


Figure 1: Bookmarks

You can also click the Contents bookmark and then click links in the table of contents to go to relevant topics.

TIP: For best viewing quality in Adobe Reader, go to **Edit** | **Preferences** | **Page Display** (path may vary somewhat depending on version). Select the applicable **Smooth Text** option.

If you need more information, links to relevant additional material in this document are included. Click a link to directly access the related information.

In the Procedures chapter, there are three types of links (cross-references) to additional material. They are grouped at the end of a procedure or descriptive section in the format shown below.

More ...

"View and Navigate this Document Online" on page 10
"Resident Manager" on page 57

➥ Click the first link to go to the indicated procedure.

➥ Click the second link to go to descriptive information about the indicated topic.

View a Printed Copy of this Document

While it is designed to be used easily online, you can print this document if you prefer. If you print this document, use the table of contents to locate the information you need. Links (cross-references) to additional material in this document include page numbers; simply go to the indicated page.

Conventions

This guide uses the following conventions:

Bold In procedures: names of screens, screen sections, buttons, menu options, keys you press.

ASE-Q Generic reference to ASPEN Survey Explorer-Quality.

web Generic reference to the World Wide Web.

More … Introduces a list of "see also" cross-references.

Note: Notes give you important information that may affect how you use a function.

TIP: Tips give you useful hints, suggestions, or alternative approaches.

LTCSP CBTs

Interactive Computer-based Training (CBT) modules covering a number of LTCSP application features and procedures are available on the Integrated Surveyor Training Website (ISTW). Follow your SA's practice for accessing the site.

Accessibility Features

This *LTCSP User's Guide* and the application user interface include 508-compliant accessibility features, which are detailed below.

In this Guide

This User's Guide incorporates the following 508-compliant accessibility features:

- Alternate text (alt text), which screen readers can read, is defined for all graphics.
- All graphics have captions.
- Information is not conveyed by means of color alone.
- Tables are not used for formatting, so all text is accessible to screen readers.
- The last chapter lists keyboard shortcuts for easy reference.
- Reading order is optimized, so content is read correctly by screen readers.

In the Application

- The LTCSP application adopts the tablet or laptop accessibility settings you set in ASE-Q. The Accessibility menu option on the System menu in ASE-Q lets you specify field color preferences and enable/disable save point notification, i.e., audible confirmation upon saving.

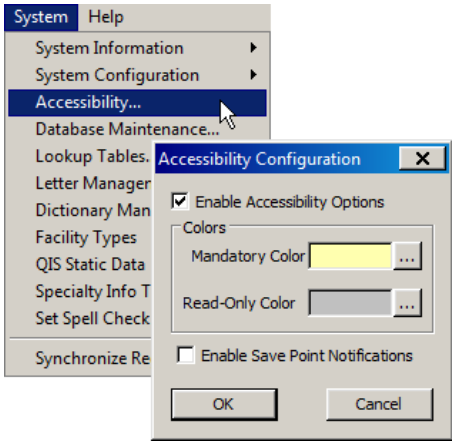


Figure 2: Accessibility option and Accessibility Configuration window

LTCSP Procedures

Import User Account File

To use the Long-Term Care Survey Process (LTCSP) application, you need an ID with Assessment access. You will need to import your user account file the first time you open ASE-Q.

To import your user account:

1. Locate the ASE-Q shortcut on your desktop and double-click.
2. Click **OK** on the alert that you are accessing a U.S. Government Information System.
3. If you receive an ASPEN Explorer notice that the date format needs to be updated, click **Yes** to proceed.
4. In the ASE-Q **Login** window, enter your **User Name** and **Password**.
5. Click **Log In**.

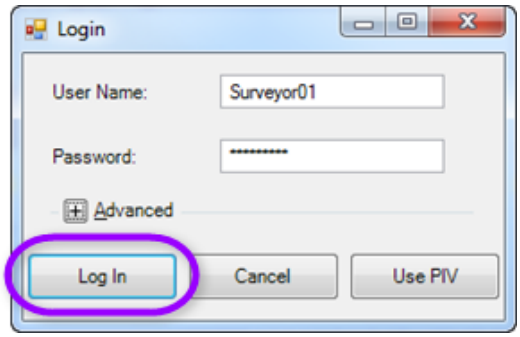


Figure 3: ASE-Q Login window

If this is your first time opening ASE-Q, your user account information is not recognized by the Sybase database and a message indicates that ASPEN cannot validate the login.

To validate the login:

1. Select **Load a User Account File**.
2. Navigate to and select the file **ASEUserTx.zip**.
3. Click **Open** to import the user information.
4. Click **Apply** to complete the transfer and open ASE-Q.

LTCSP Surveys

The scheduling supervisor or team coordinator (TC) first sets up an LTCSP survey shell in ACO, then exports it to team members. This ensures that all team members are working with the same survey when they begin. Later, survey data from all team members is combined.

Note: The term Team Leader appears in the application. This represents the same roles/responsibilities as Team Coordinator.

Create LTCSP Survey Shell in ACO

A new survey can be set up in ACO at any time, even before the survey visit. It is associated with the applicable certification kit for the facility.

To create a survey shell:

1. In **ACO**, open or create a certification kit for the facility.
2. In the **Survey List** section of the **Certification & Surveys** tab, click **New** to open the **Create Survey** window.
3. Enter basic survey information.
4. Assign team members and designate the team leader.

More ...

For detailed information on creating certification kits and surveys including combined surveys (certification and complaint), refer to the *ACO Procedures Guide*, which is posted on the QTSO website at https://qtso.cms.gov/software/aspen/reference-manuals.

Transfer LTCSP Surveys to ASE-Q

From ACO, the scheduling supervisor or team coordinator can export one or more LTCSP surveys with the associated provider and intake information in an encrypted format to a transfer location. This can be a shared wired or wireless network location, or USB flash drive. Surveyors then import the contents of the export transfer file into ASE-Q.

Note: The survey shell should be exported from ACO as close to the survey start data as possible and no more than 5 business days before the survey start date.

To export an LTCSP survey shell from ACO:

1. In **ACO**, locate and select the survey in the **Tree** or **List** view.
2. Drag it to the **Export** button in the toolbar.

3. In the **Export** window, indicate your **Export To** location according to your SA practices.
   - Aspen Transfer Location–Select the applicable location.
   - Other Zip File Location–Enter the path to the transfer file or navigate to it using the binoculars.
4. Click **OK** in the **Export** window.
5. In the **Survey Export** window, select the survey(s) you want to send to the transfer destination.
6. Click **Continue with Export**.

   If there are differences between source and destination content, one or more Merge windows may appear.
7. Resolve any source/destination differences and continue the transfer.
8. Address sample calculation issues.
   - Survey already exported

     If this is the initial export of the survey, the LTCSP sample is automatically calculated. If the survey has already been exported, however, a message appears with the date and time of the previous export, as well as the user who exported the survey.

     ➥ Indicate whether you want to recalculate the LTCSP sample.
     - Select **Yes** to recalculate the sample and continue with the export.
     - Select **No** to continue the export without recalculating the sample.
     - Select **Cancel** to abort the export.

     Note: Only recalculate the sample if the prior export was more than 5 days before the survey start date. If survey team members all export the survey from ACO, only the team coordinator should recalculate the sample to avoid data conflicts.
   - Survey being exported by another user

     If another user is exporting the survey, a message notifies you that the LTCSP sample calculations are currently being performed by other users, and asks if you would like to wait and retry the transfer.

     ➥ Indicate whether you want to retry the transfer.
     - Select **Yes** to retry the LTCSP transfer after the other user's transfer is complete.
     - Select **No** to skip the LTCSP transfer.
     - Select **Cancel** to abort the transfer.

9 In the **LTC Survey Process Transfer window**, click **OK**.

10 In the **Finalize Transfer** window, select **Apply** to complete the export process, or **Cancel** to reverse the transfer.

When the export is complete, surveyors can import the survey(s) with the associated provider and intake information into ASE-Q.

To import an LTCSP survey into ASE-Q:

1 On the **ASE-Q** toolbar, click **Import**.

2 In the **Import Type** section, select **Surveys**.

3 Select the appropriate **Import From** option to indicate the location of the transfer file:

- ASPEN Transfer Location–Select the applicable location.
- Other Zip File Location–Enter the path to the transfer file or navigate to it.
- Locate ASE Database–Use option for wired or wireless ASE-Q to ASE-Q network transfers. Enter database name or IP address.

4 In the **Select Survey(s) to Import** window, select the surveys you want to import and click **Continue with Import**.

A log of changes made during the import is displayed.

5 Click **OK** in the **LTCSP Survey Process Information** window.

6 In the **LTC Survey Process Transfer** window, click **OK**.

7 Click **Apply** to finalize the transfer.

Import an existing survey

If you import an existing survey into ASE-Q, you have two options: to import only survey and complaint data or to import all data. Importing all data runs the risk of overwriting all your survey data. You will receive the following message during the survey transfer.

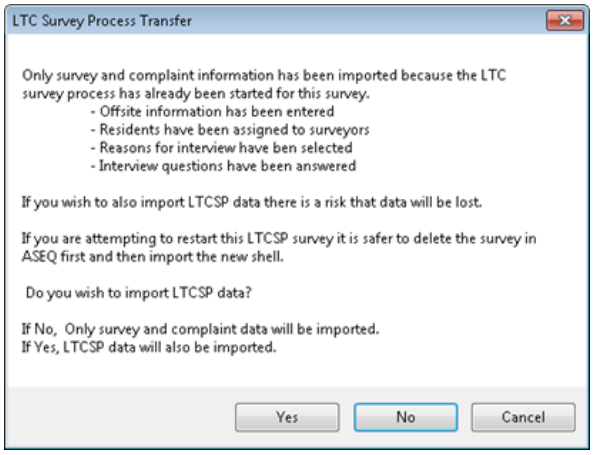


Figure 4: LTC Survey Process Transfer window

More ...

For detailed information on transferring surveys from ACO to ASE-Q, refer to the *ACO Procedures Guide* and *ASE-Q Procedures Guide*, which are posted at https://qtso.cms.gov/software/aspen/reference-manuals.

Open a Survey in LTCSP

You open a survey in LTCSP through ASE-Q either directly in Tree view or through the Citation Manager. You must be on the survey team and have Assessment access.

To open LTCSP from Tree view:

1. Open **ASE-Q**.
2. In **Tree view**, locate the LTCSP survey.
3. Right-click the survey and select **LTCSP**.

   The LTCSP application is opened for the selected survey.

Note: The LTCSP option is enabled only for LTCSP surveys. Currently that is the initial health survey for a certification or recertification, or a Federal Monitoring Survey (FMS) for a federal nursing home.

To open LTCSP from Citation Manager:

1. Open **ASE-Q**.
2. In **Tree view**, locate the LTCSP survey.
3. Right-click the survey and select **Citation Manager**.
4. Click the **LTC Survey** button to open the survey.

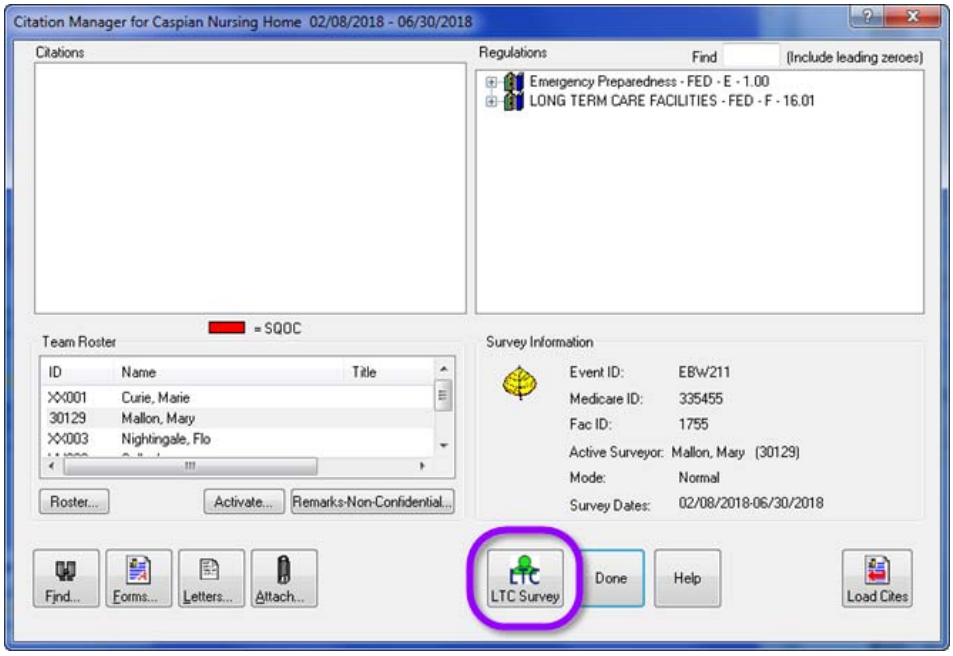


Figure 5: LTC button in Citation Manager

The LTCSP application opens for the survey.

Note: The LTC Survey button only appears if the survey is defined as an LTCSP survey. Currently that is the initial survey for a certification or recertification for a federal nursing home.

LTCSP Screen Navigation and Features

All screens have the same basic layout making it easy to move from one task to the next.

Title toolbar

The Title bar always includes the screen title and Navigation menu. Some screens include a Back button and navigation icons.

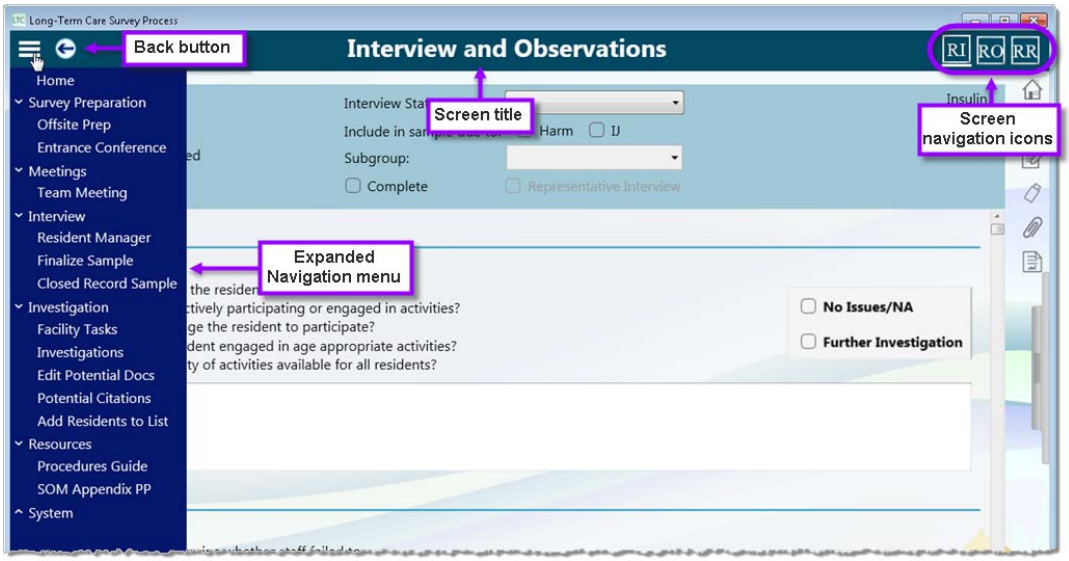


Figure 6: Title toolbar

Quick Access menu

This set of general function icons is located on the right side of every screen.

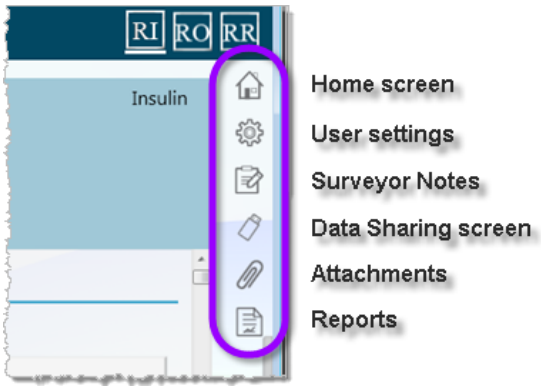


Figure 7: Quick Access menu

Function toolbar

This toolbar includes function icons specific to the screen/task.

Figure 8: Residents screen–Function toolbar example

Change Column Order

You can rearrange column headings to any order you want in the Residents list; Offsite Prep, Finalize Sample, Investigations, and Workload screens; and any area of a screen that has a list with headings.

To move a column:

➥ Click the title of the column and drag it to the desired location in the header.

Drop-down Lists

Drop-down lists appear throughout the application where you need to select one or more items from a list. For example, the following screen within Investigations has two drop-down lists.

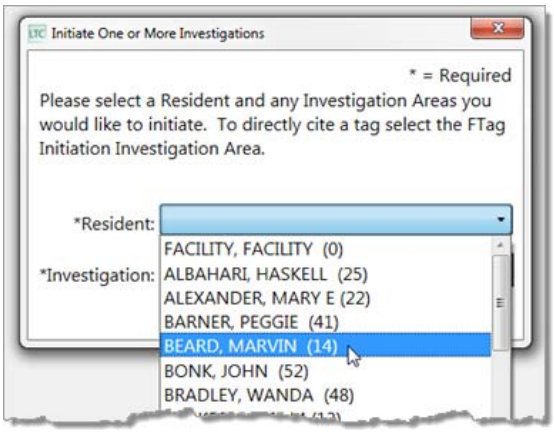


Figure 9: Resident drop-down list

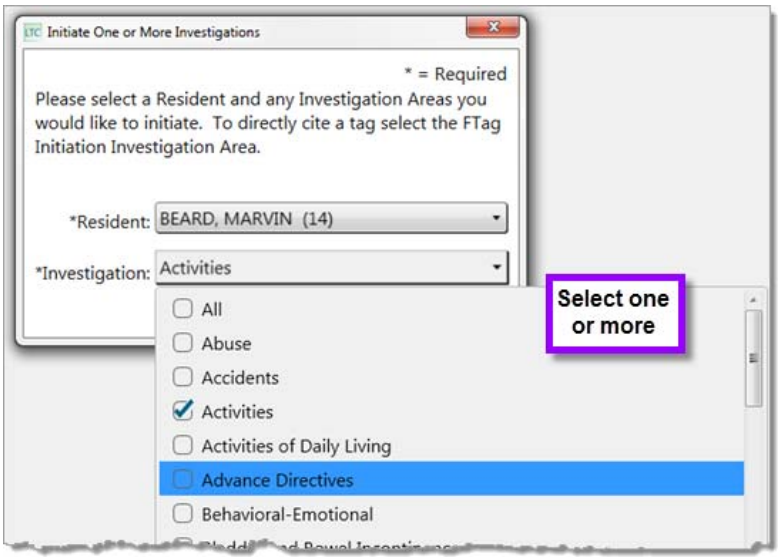


Figure 10: Investigations drop-down list

To close a drop-down list:

➥ Click outside the list or press **Escape**.

Hover

When you hover the cursor (i.e., move it over object on screen), the application will determine the cursor type/shape to display (hand, i-beam, etc.) based on the context. If you hover the cursor over a button or icon, a description of the command it represents displays.

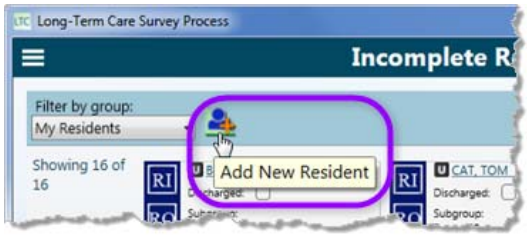


Figure 11: Example of Hover help

Expand/Collapse Sections

On facility task and investigation screens, you can expand and collapse Use, Instructions, Probes/Critical Elements, MDS indicators, etc. as needed to more easily accomplish your work.

To expand/collapse a section:

➥ Click the arrow in front of the section label. Click again to collapse/expand.

Figure 12: Use and Instructions sections collapsed, Observations section expanded

Resize Sections with Expander Bars

In the Entrance Conference, facility task, and investigation screens, use Expander bars to control screen space by adjusting section size.

To resize a section:

➥ Hover over the Expander bar until you see a double-headed arrow, then click and drag the bar up or down to resize the area. For example, it may be helpful to expand the Notes section so you can see more of the text you entered.

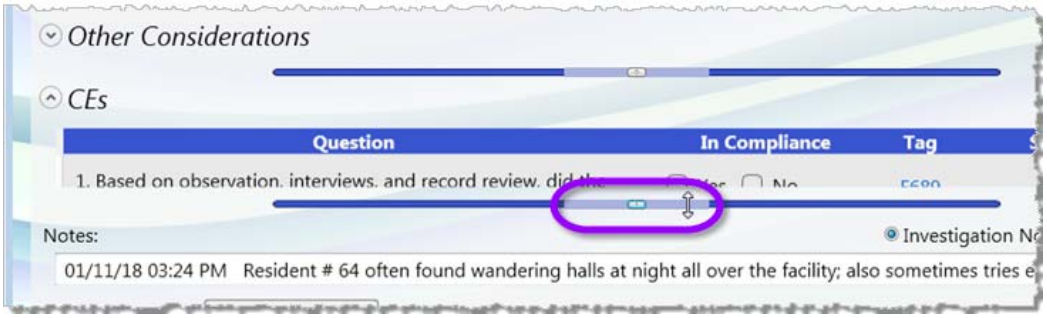


Figure 13: Expander bar activated

-or-

Hover over the Expand icon in the center of the bar until you see a hand cursor, then click to expand the area beneath the bar to full screen. Click the icon again to return the area to its previous size.

Figure 14: Expander bar–Expand icon

Update PDF Documents

LTCSP includes PDFs for facility task and investigation pathways along with procedure guides and report templates. On occasion these PDFs need to be updated, and you can update them from LTCSP. Your state agency will be

notified when updates have been made to these documents. You need to be connected to the internet to update documents.

To update PDF documents:

1. Verify you are connected to the internet.
2. Open a survey in LTCSP (it doesn't matter which survey, once updated all PDFs will be available for any survey).
3. The **Navigation** menu should be open, if not, click the menu icon to open. Expand the **System** section, and select **Update Documents**.

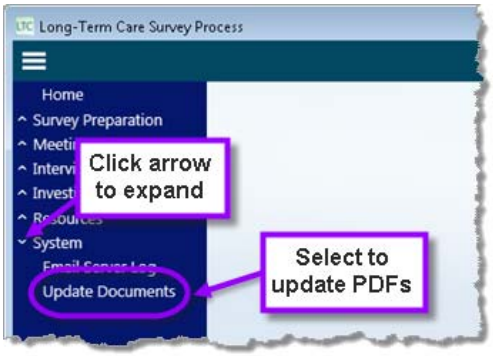


Figure 15: System menu expanded to show Update Documents option

A popup reminds you to close all open PDF documents—if open, a document cannot be updated.

Click **OK**.

4. Click **OK** when the updates are complete.

TIP: If you get a message saying that a PDF was open and the update stops, close the PDF and rerun Update Documents.

LTCSP Notes

The LTCSP application provides multiple places to add notes. The main notepad, Surveyor Notes, is available from the Quick Access menu and can be used to record general notes. Specific notes fields are available in some screens and are associated with the screen's functionality. For example, when conducting a facility task, you can take notes for the task you are working on.

If you copy and paste from another application (e.g., a web page) the formatting will be removed and only the text will copy. You can format the text in LTCSP. Copying and pasting text from an LTCSP notes field to another LTCSP notes field will keep any formatting.

TIP: If you want to keep the formatting from another document, attach the document using the Attachments feature (see "Add Attachments" on page 36).

Features common to a number of notes fields include:

- **Alt** + **R** or **Insert Resident ID** button to insert resident number.

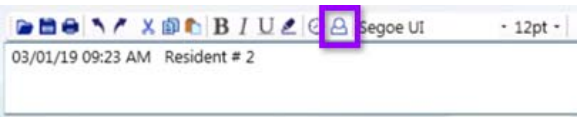


Figure 16: Insert Resident ID button

In a screen used to gather information for a specific resident, the resident ID is inserted. In notes fields where no specific resident is referenced, you select a specific resident from the full resident list to insert their ID.

Note: Inserting a resident ID using the keystroke or icon automatically adds the resident to the "Sample List Provided to the Facility" report.

- **Alt** + **T** or **Insert Timestamp** button to insert current date/time.

Figure 17: Insert Timestamp button

The system automatically inserts a date/time stamp into some notes fields when you click in the field the first time. For subsequent notes, use the shortcut (Alt + T) or button to insert the date/time stamp.

- Standard word processing features.

  Basic editing functions are available in all notes fields.

  Note: Highlighted text does not show in combined notes fields such as Resident IP Notes in facility tasks or when showing answers for all surveyors in either facility tasks or investigations. Highlighting also does not show on reports.

- Record notes using stylus or keyboard entry.
- Click **Back** button to exit notes field when finished.
- All information in notes fields and throughout the application is automatically saved every two minutes.

More ...

"Notes Menu Bar" on page 224
"Surveyor Notes and Note Fields Shortcuts" on page 226

Surveyor Notes

Allows each surveyor to enter notes throughout the survey. You cannot view other surveyor's notes in LTCSP, but you can view all surveyor notes (after data share) in the "Surveyor Notes" report. You can also review your notes History.

To open Surveyor Notes:

1 In the **Quick Access** menu on any screen, click the **Surveyor Notes** icon, or press **Alt** + **N**.

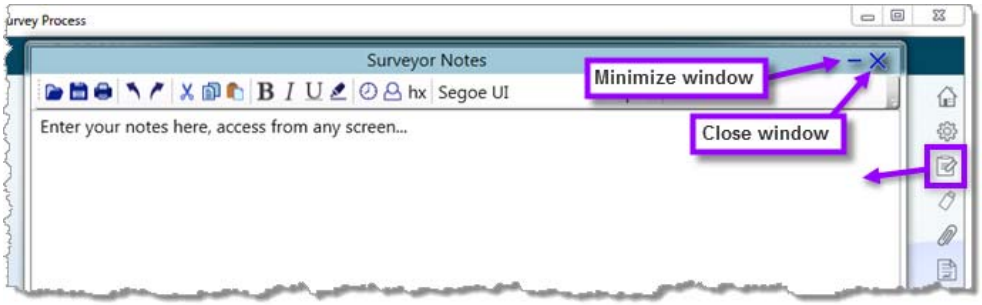


Figure 18: Surveyor Notepad

2 Click the **Minimize** button to keep notepad available from the taskbar.

-or-

Click the **X** in the upper right to close.

Surveyor Notes in Resident Manager

When in the Resident Manager List or Card view screens, you can pin Surveyor Notes to the bottom of the screen. These are the only screens where this option is available. Once you have pinned the notes, LTCSP remembers this setting for both the List and Card View screens until you unpin or close Surveyor Notes.

To pin Surveyor Notes:

- From the **Quick Access** menu, click the **Surveyor Notes** icon, or press **Alt** + **N** to open the **Surveyor Notes** window.
- Click the **Pin** icon in the Surveyor Notes title bar. The Surveyor Notes appear at the bottom of the screen.

TIP: Use the Expander bar to resize the notes box.

To unpin Surveyor Notes:

- Click the **Unpin** icon in the Surveyor Notes title bar. The Surveyor Notes window opens and no longer appears on the bottom of the screen.

To close Surveyor Notes:

➥ In either the Surveyor Notes window or the pinned notes box, click the blue **X** to close Surveyor Notes.

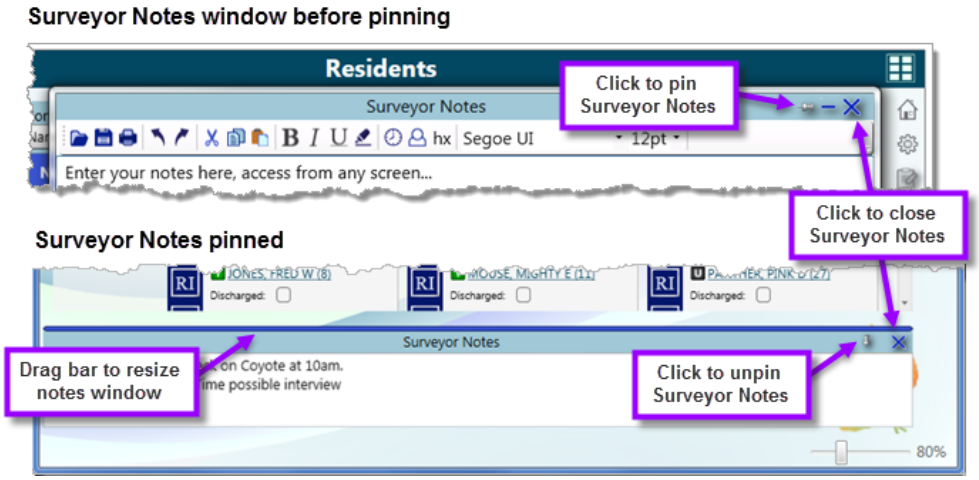


Figure 19: Surveyor Notes pinned and unpinned in Resident Manager

More ...

"Notes Menu Bar" on page 224
"Facility Tasks" on page 109
"Reports and Attachments" on page 33

Interview, Observations, and Record Review Notes

Notes entered for care areas in the initial pool Interview and Observations, Observations, and Record Review screens carry forward with the resident and care area. The date/time stamp is automatically inserted when you click in the field the first time. For subsequent notes, press **Alt** + **T** or use the **Insert Timestamp** button to insert the date/time stamp.

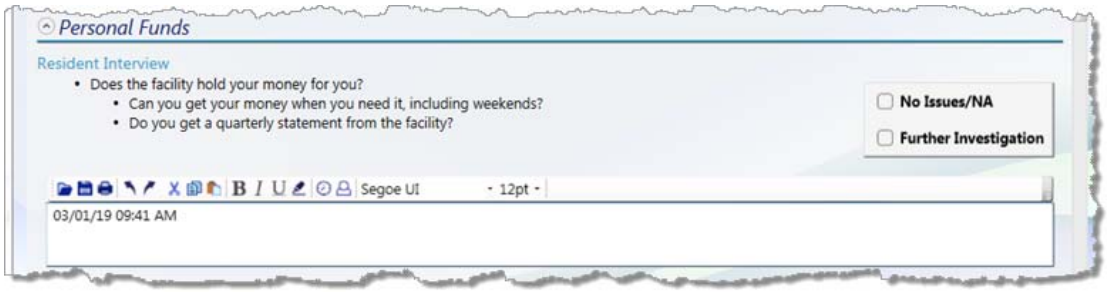


Figure 20: Care area notes field

Facility Tasks Notes

Notes fields are available for every task and include standard notes features. These notes carry forward with the facility task. Care area notes taken during the interview, observation, or record review for a resident listed in a facility task can be viewed in the Resident Initial Pool Notes field or by clicking the resident name in the facility task resident list.

View Resident Initial Pool Notes

For any surveyor who took notes for a resident added to a facility task, those notes are viewable in the notes area for the facility task.

To view initial pool notes for residents in a facility task:

➥ On the specific facility task screen, select **Resident Initial Pool Notes** for the notes field.

You can copy any notes from here and paste into any other notes field. If you want to include the initial pool notes in the CMS-2567, ensure you copy and paste the applicable information into the Facility Task Notes since that is the only information that pulls forward to the Potential Citation screen.

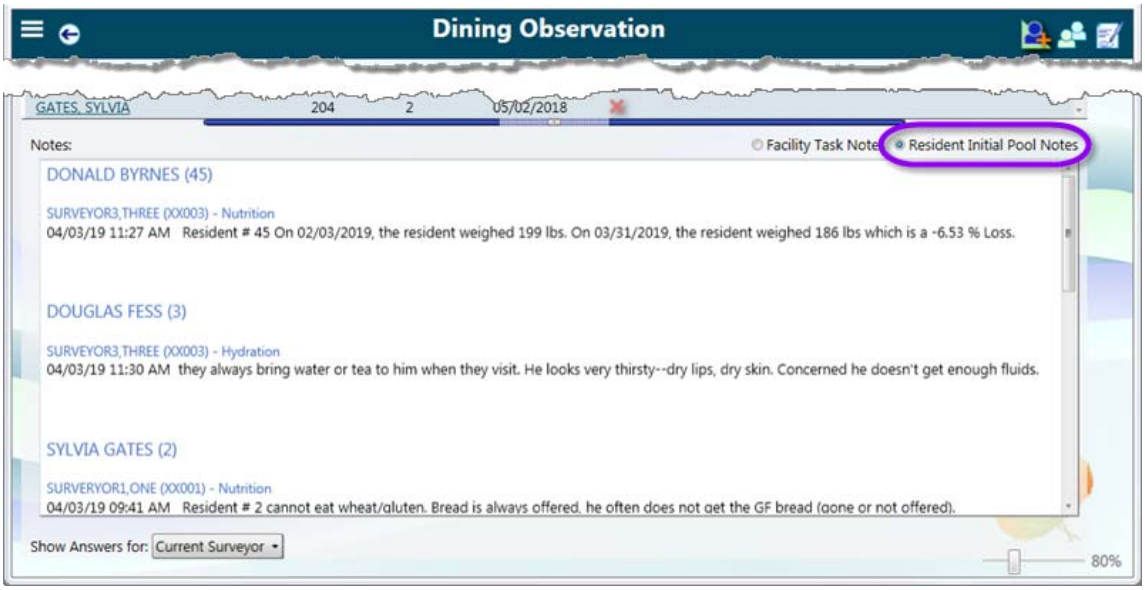


Figure 21: Resident Initial Pool Notes in a facility task

View Surveyor Facility Task Notes

Show Answers for Select **All Surveyors** to see notes entered for that task by any surveyor (read-only) after data is shared, or select **Current Surveyor** (default) to show only notes entered by you. You must set the filter to Current Surveyor to enter documentation or answer any CEs.

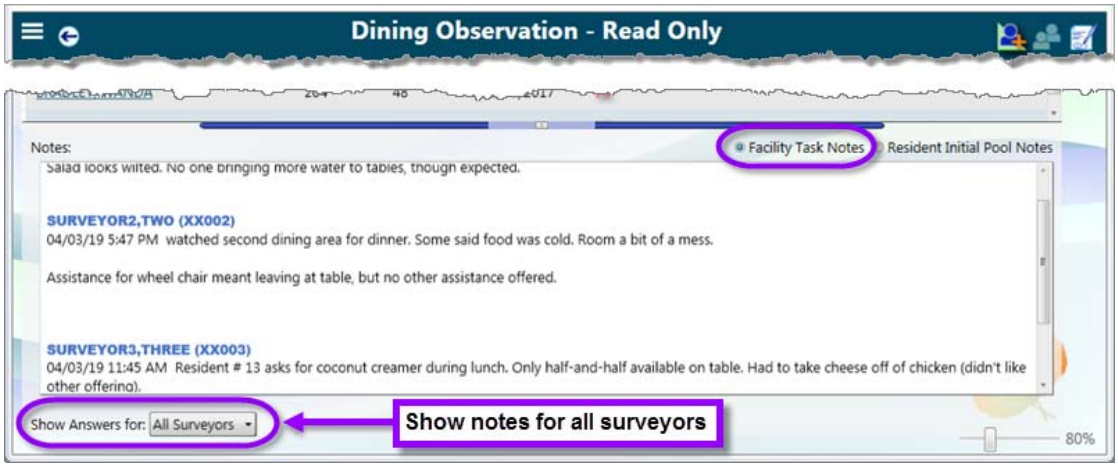


Figure 22: Facility task Notes field

Medication Administration

You can view other surveyors' notes (after data share) in the Med Admin notes screen—both handwritten and in the text editor.

To review other surveyor Med Admin notes:

1. From the Medication Administration facility task, open the Med Admin screen (click the icon in the upper right).
2. From the **Staff ID** drop-down select a surveyor. Their notes appear as read only.

Note: You will see the selected surveyor notes in whatever view you have open. For example, if you only have the handwritten panel open, you will not see any notes in the text editor.

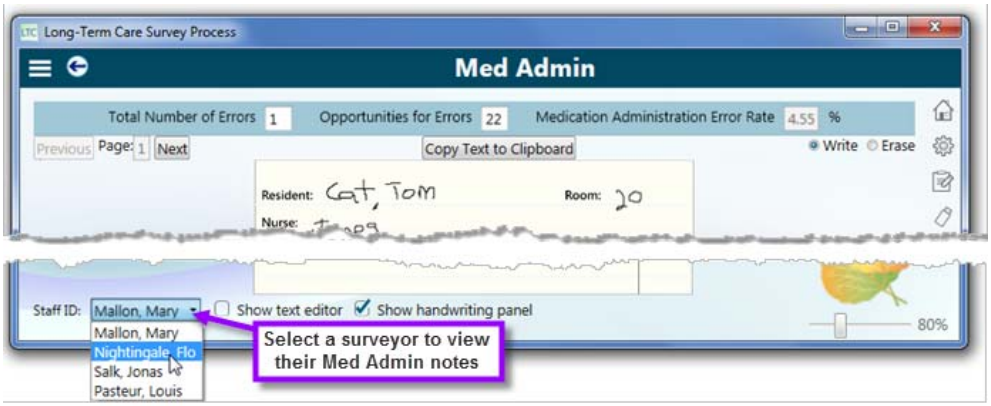


Figure 23: View other surveyors' Med Admin notes

Investigation Notes

Two Notes fields are provided on investigation screens:

- **Investigation Notes**

  Notes specific to the investigative area for the current resident. Investigation Notes apply only to the current investigative area. Initial pool notes for the investigative area appear under the Investigation Notes.

- **Resident Notes**

  General information about the resident available to any investigation the resident is associated with. Resident Notes carry over to all investigative areas for the resident.

Use the radio buttons to toggle between Investigation Notes and Resident Notes.

Select Show Answers for **All Surveyors** to show notes entered by any surveyor (read-only) after data is shared, or select Show Answers for **Current Surveyor**

to show only notes entered by you. You must set the filter to Current Surveyor to enter documentation or answer any CEs.

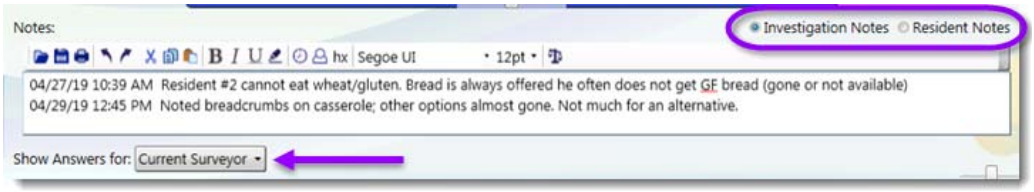


Figure 24: Investigation Notes field

View Body Map and Drawings for any Surveyor

You can view other surveyors' drawings (after data share) in the investigation notes screens—body maps for pressure ulcers and abuse; drawn/handwritten notes in other investigations, and the dining and kitchen facility tasks.

To review another surveyor's drawings:

1. From the investigation, open the Draw or Body Map screen (click the icon in the upper right).
2. From the **Staff ID** drop-down, select a surveyor. Their drawings appear as read only.

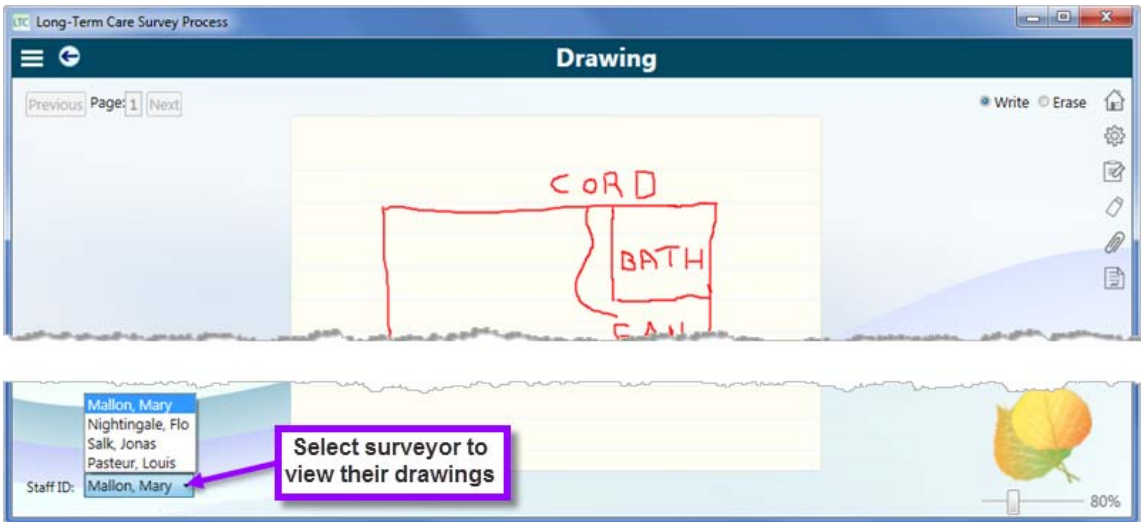


Figure 25: View other surveyors' investigation drawings

Notes History

The History feature in Surveyor Notes, Facility Task Notes, and Investigation Notes allows you to view the notes you have previously taken in your current survey. If you deleted, lost, or edited any text that you may want to include, you can find the information by selecting the time stamp before the text was changed or removed. The system saves your notes every two minutes or when you close the Surveyor Notepad or leave the facility task or investigation screen

ensuring that you will never lose more than two minutes of work. If no change is made to the notes within two minutes, that time stamp will not appear in the list.

The history is saved locally and does not get transferred when you data share. The system automatically deletes the notes history after 90 days.

To view Document History:

1 From the Surveyor Notes window or the notes field in a facility task or investigation, click the **History** button on the notes toolbar to open the **Document History** window.

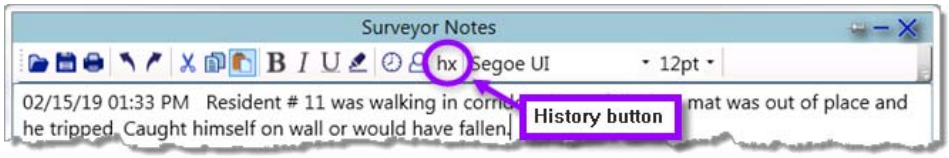


Figure 26: Example of a Notes History button in the toolbar

2 Select a note by the time stamp in the left-hand pane. The notes for that time appear on the right. Use the scroll bar to review the entire note, if necessary.

You can copy and paste all or any portion of the notes into your notes, any other notes field, or any text editor.

3 Click the **X** in the upper right hand corner to close the **Document History** window.

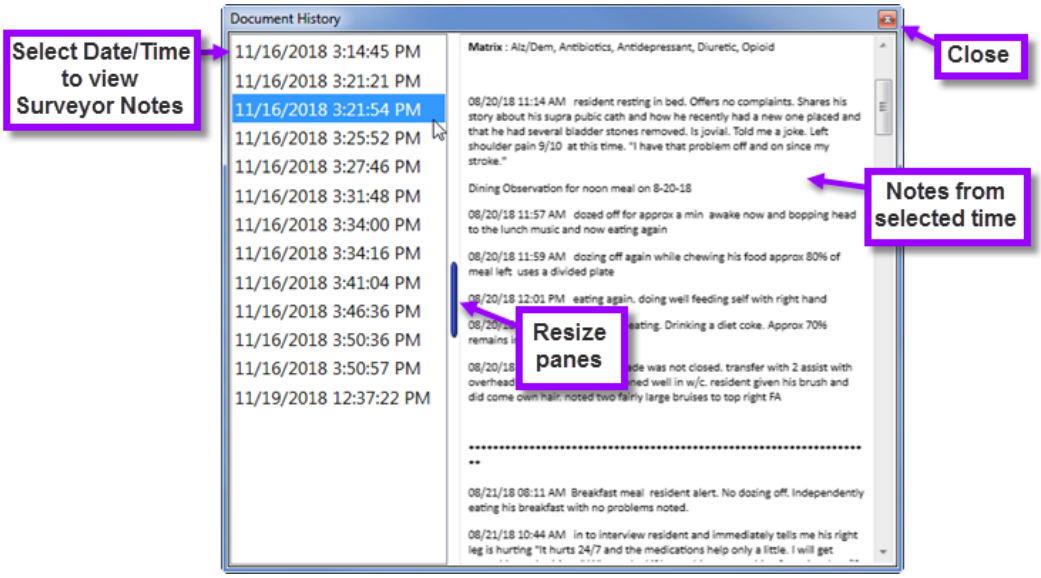


Figure 27: Surveyor Notes Document History window

Note: The Show History option is not available when the Surveyor Notepad is pinned to the list or card view screens. Unpin the notes to access the history function.

Reports and Attachments

A number of LTCSP reports and forms are available to view and print as needed during the survey process. You can add supporting and supplemental material as attachments.

Generate Reports

The Reports option provides access to a variety of reports. Click the **Reports** icon (or press **Alt** + **P**) from any screen to generate, view, and print reports.

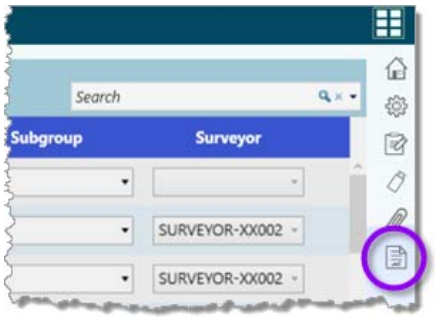


Figure 28: Reports icon

The Reports window is context sensitive. Depending on the screen you are on when you click the Reports icon, different reports appear in the top section

(Reports associated with the current view). The bottom section lists all other LTCSP reports.

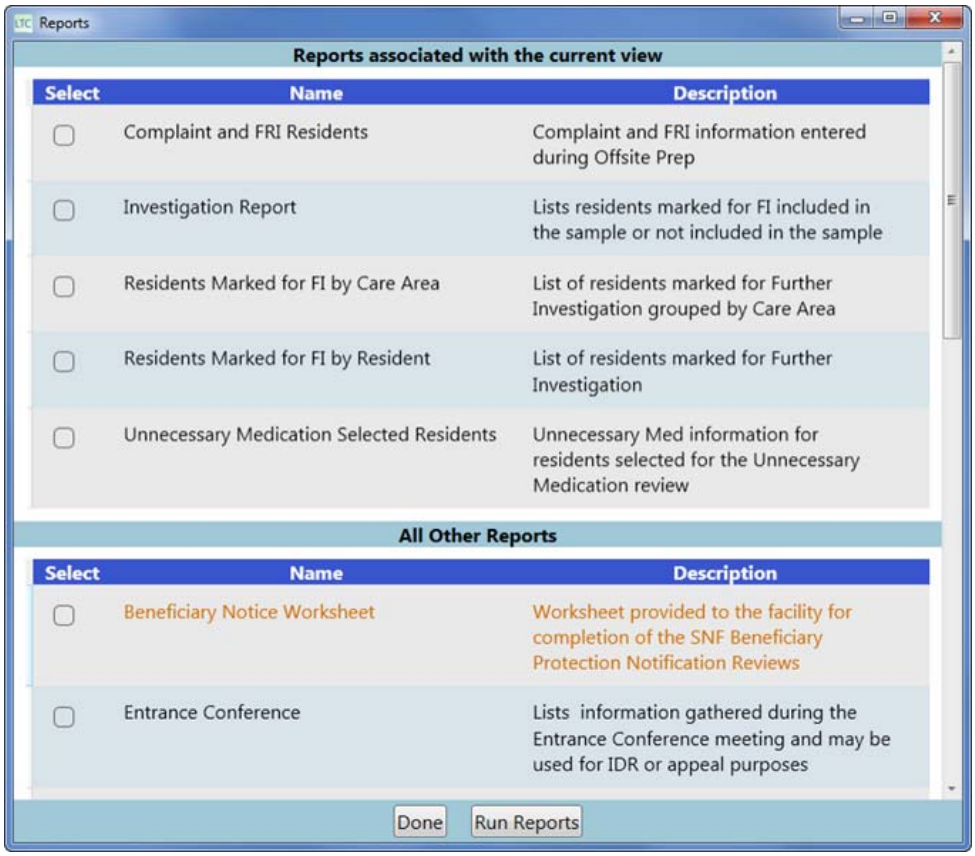


Figure 29: Reports window opened from Finalize Sample

To generate a report:

1. On the **Quick Access** menu. click the **Reports** icon.

   -or-

   Press **Alt** + **P**.
2. In the **Reports** window, select one or more reports.

   Report(s) related to the screen you are on, appear in the top of the window.
3. Click the **Run Reports** button at the bottom of the window.

   A PDF of each report is generated.
4. Click the **X** in the upper right of the PDF window to close it.
5. Click **Done** to close the **Reports** window.

Use the "Immediate Jeopardy Template"

If you need to conduct an IJ investigation, the "Immediate Jeopardy Template" is available from Reports. You can fill in the writable PDF form on your tablet.

To use the "Immediate Jeopardy Template":

1. From the **Quick Access** menu. click the **Reports** icon.

   -or-

   Press **Alt** + **P**.

2. Scroll to the **Immediate Jeopardy Template** listing and click the icon to open.

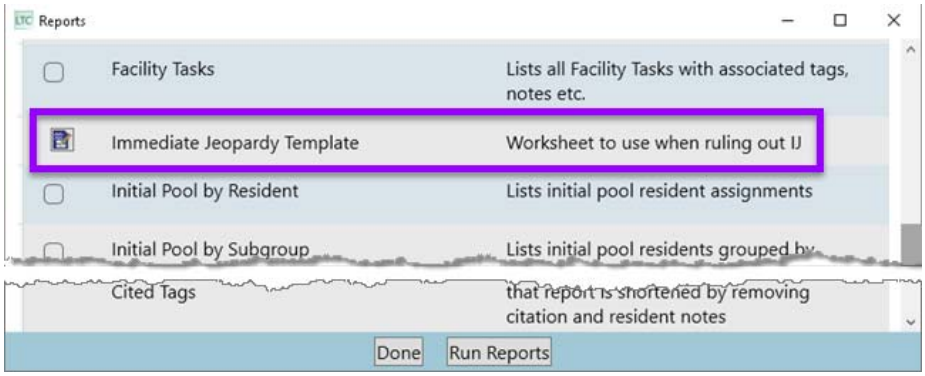


Figure 30: Immediate Jeopardy Template listed in Reports

3. Enter information into the template. Once you have entered some text, from the **File** menu, select **Save As** (or **Shift** + **Ctrl** + **S**) to save the PDF and automatically attach it to your LTCSP survey.

   ➥ The **Save in recent folder** dialog opens. Select the default directory (if you change the directory, the system will not be able to attach this document).

   ➥ Click **Save** in the **Save As** dialog and **Yes** to overwrite the file. The system automatically names the form with the event ID and the surveyor ID (*eventID-surveyorID*-IJ_Template.pdf).

   ➥ Close the document and click **Attach** in the **File Open in Another Program** dialog. The system automatically attaches the document and lists it on the **Attachments** screen. Enter a description for the IJ Template on the Attachments list.

TIP: If you close the "Immediate Jeopardy Template" and want to make changes, use the **Edit** button on the **Attachments** screen (see below). When you use **File** | **Save As** again, the system attaches the updated version of the document to the survey with a new date/time stamp.

---

4 If you want to add a new "Immediate Jeopardy Template" once you have already created and saved one (e.g., if you have more than one FTag cited at IJ and you only list one FTag on each template), open a new template from **Reports**. Answer **Yes** to create a new document or **No** if you want to edit an already existing template.

If you click **Yes** to create a new template, from the **File** menu, select **Save As** (or **Shift** + **Ctrl** + **S**) as before to save and attach a new copy of the template. The system automatically assigns the **Immediate Jeopardy** category. To help keep multiple copies of the "Immediate Jeopardy Template" straight, enter a description on the **Attachments** screen for each (see below).

Add Attachments

During a survey, you may want to attach forms and other documentation that support the investigation. Files attached in LTCSP are included in the data sharing process, and also appear in ASE-Q Tree view and Citation Manager | Attachments.

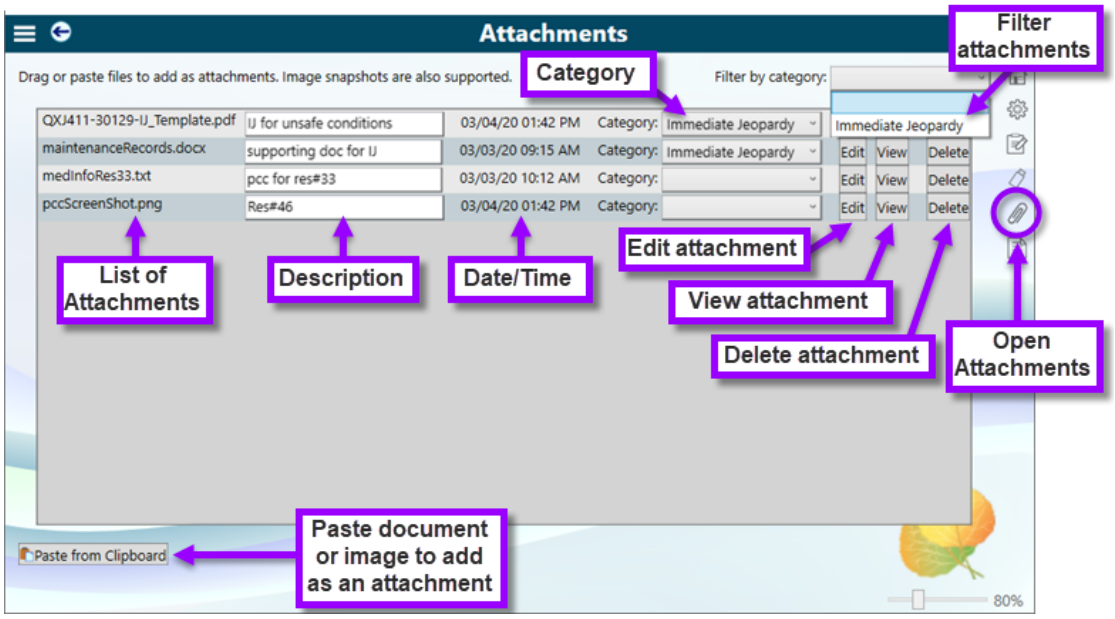


Figure 31: Attachments screen

The **Attachments** icon on the **Quick Access** menu opens the Attachments screen where you to attach files to the survey; it is available from all screens.

Attachments uploaded from LTCSP are limited to 4 MB in size. Anything larger must be uploaded from ASE-Q.

The same file types can be attached in LTCSP as in ASE-Q:

- Microsoft Word documents
- Microsoft Excel spreadsheets

- PDF documents
- Images: jpg, png etc.

You can either copy and paste or drag and drop an attachment.

To copy and paste a screenshot:

1. In the **Quick Access** menu, click the **Attachments** icon (paper clip).

   -or-

   Press **Alt** + **A**.

   - Press **Ctrl** + **Alt** + **Print Screen** or use the Windows Snip tool to grab a screenshot.
2. On the **Attachments** screen, click the **Paste from Clipboard** button at the bottom of the screen to add.

   You will get an error message if the file is larger than 4 MB.
3. Click in the text box to the right of the file name and enter a brief description.
4. Click **View** to see the screenshot.

To copy and paste a file:

1. Open the **Attachments** screen.
2. Copy the file from Windows Explorer.
3. Repeat steps 3-5 above.

To drag and drop an attachment:

1. Open the **Attachments** screen.
2. Drag a file from your desktop to the Attachments screen.
3. Repeat steps 4 and 5 above.

To confirm an attachment is in ASE-Q:

1. Open **ASE-Q**.

   From the Tree view:

   - In **Tree** view, locate the applicable LTC survey.
   - Expand the **Attachments** node and verify that the attachment is listed.

   -or-

   From Citation Manager:

   - Right-click the survey and select **Citation Manager**.
   - Click the **Attach** button.

To edit an attachment:

1. On the **Attachments** screen, click the **Edit** button for the attachment. The attachment opens in the default program for the file type (excluding scanned or read-only documents).
2. Update the document. From the **File** menu, select **Save As**. You must use the Save As option and not just Save to have the updated version of your document attached to the survey.
   - ➥ The **Save in recent folder** dialog opens. Select the default directory (if you change the directory, the system will not be able to attach this document).
   - ➥ Click **Save** in the **Save As** dialog and **Yes** to overwrite the file.
3. Close the document and click **Attach** in the **File Open in Another Program** dialog. The system automatically attaches the document and lists it on the **Attachments** screen.

   The document changes are saved in LTCSP and the date/time stamp updates to the time you made the changes.

TIP: You must use **Save As** to have your updates automatically saved to your document already attached to your LTCSP survey. If you just save a document, the system won't update the attached document and you will have to attach the updated version to LTCSP.

To view an attachment:

1. On the **Attachments** screen, click the **View** button for the attachment. The attachment opens in the default program for the file type.
2. Review the information. If you make any changes that you wish to include, you cannot automatically attach the file since it is in Read-only mode. Follow the above directions to attach the updated document to your LTCSP survey.

To filter attachments:

1. On the **Attachments** screen, click the **Filter by Category** drop-down menu and select the **Immediate Jeopardy** category (this is currently the only available category).

   The screen lists only those attachments assigned the **Immediate Jeopardy** category.
2. To to show all the attached documents again, click the **Filter by Category** drop-down menu and select the blank line.

To delete an attachment:

1. On the **Attachments** screen, click the **Delete** button for the document.

   The filename and description appear with a strike through, but you can still view the document.

2. To restore the attachment while it is still visible in the list, click the **Undelete** button for the document.
3. To permanently delete attached file(s) marked with a strike through, click **Delete Marked Attachments** at the bottom of the screen.

   The attachment(s) disappear from the list.

Data Sharing

The LTCSP application includes functionality to facilitate data sharing between Team Coordinators (TCs) and team members as they prepare for and conduct a survey. LTCSP has one data sharing screen that provides all methods of data transfer—no difference for RO users. You can share encrypted data using a:

- File stored on a USB drive or anywhere on a shared system
- Secured wireless network
- Secured wired network

Each team member's data is first shared with the team coordinator, then the TC shares the data with all team members to ensure that updates are correctly recorded and the TC and all team members are working with the same survey information. Data sharing is always performed between team members and the team coordinator. Team members cannot share data with other team members directly.

Open the Data Sharing screen

The Survey Team Data Sharing screen looks the same for team members and the team coordinator, but the options and instructions are different depending on your role.

To open the Survey Team Data Sharing screen:

➥ Click the **Data Transfer** icon in the Quick Access menu, or press **Alt** + **D**.

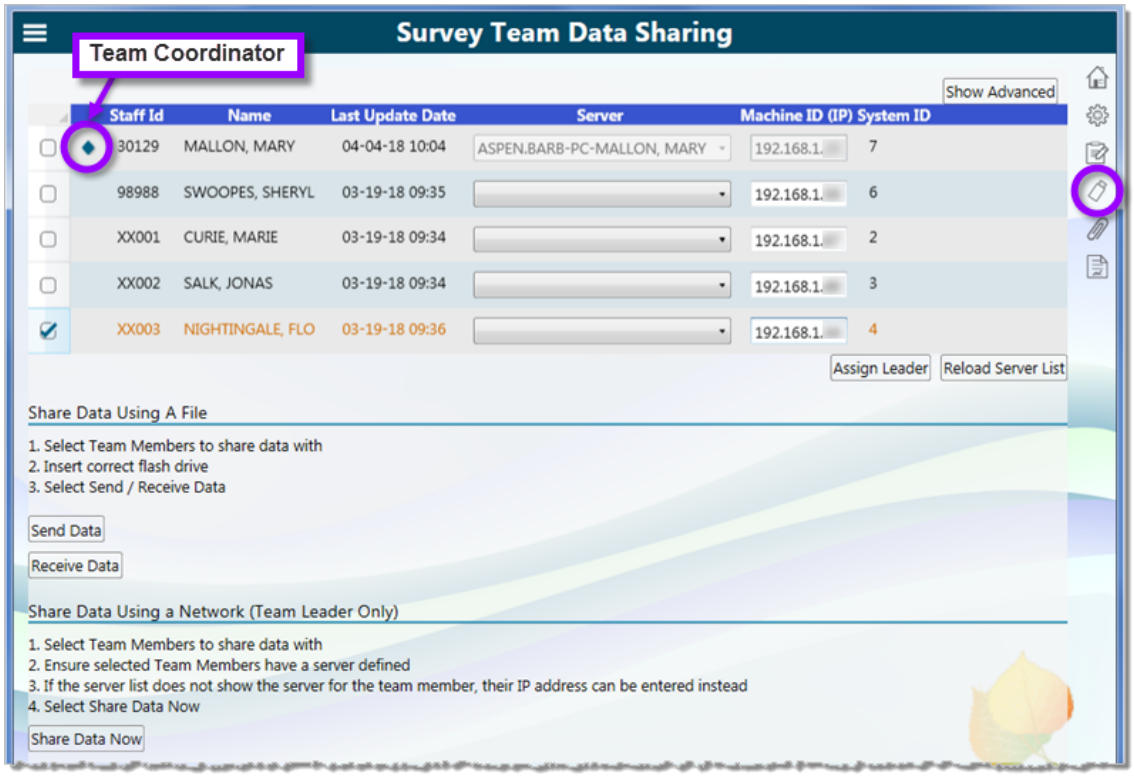


Figure 32: Survey Team Data Sharing screen

The **blue diamond** next to the name in the team roster section at the top indicates the team coordinator. If you need to reassign the TC role to a different survey team member, you can select the desired team member and then select the **Assign Leader** button. The blue diamond indicator then appears next to the newly assigned TC.

The **Last Update Date** column displays the last date and time data was shared. When sharing data using a file (USB), this is the date and time of the most recent data send/receive action for the associated surveyor. When sharing data using a network (wired/wireless), the date and time indicate the most recent transfer for both the team member and team coordinator.

The **Server** column lists IDs of servers using an LTCSP database that are connected to your secured network. You can select the **Reload Server List** button to refresh the list to see any connected team members.

The **Machine ID (IP)** column allows you to enter another team member's computer IP address if necessary, when data sharing using a wireless network. The computer assigns each machine a unique IP address when it is connected to a wired/wireless network, so every survey team member should verify their IP address before data sharing.

The **System ID** column lists the resident ID number assigned to each of the surveyors. This number is used to identify the resident ID range assigned to each team member. This assures that if surveyors add residents, they'll have unique resident IDs.

Reorder the columns by clicking the column title and dragging to desired place.

Share Data by USB/File

To share LTCSP data by file, the file is first sent to a transfer file on a flash drive (USB), or a drive on a shared system. Then the data is received by pulling it from the transfer file to the destination computer where data is updated accordingly. Regional and Central Office (RO/CO) users must adhere to additional security requirements when sharing data using a USB/File.

To send data to a flash drive for sharing:

1. Open the **Survey Team Data Sharing** screen.
2. Insert the flash drive into your computer.
3. On the **Survey Team Data Sharing** screen, select the team member(s) for data sharing if you are the team coordinator (The TC may select multiple team members to share data with). If you are a team member, you must select the team coordinator.

   Team coordinators can share data with all team members, but team members can only share data with the TC.
4. In the Share Data Using A File section, select **Send Data**.
5. In the **Select the Drive/Folder you want to transfer to** window, select the USB as your transfer location.

   The default transfer filename is <EventID>-<Surveyor ID>, e.g., 2EN911-50250.
6. Select **Open** to initiate the data send.

   A Transfer Progress window appears (often very briefly). When the data send is complete, a notification lets you know if it was successful or not. If the transfer failed, this window lets you know what didn't transfer, and why.
7. If the data send was successful, select **OK**.

To receive shared data from a flash drive:

1. If necessary, open the **Survey Team Data Sharing** screen on your (the receiving TC's/member's) computer.
2. Insert the flash drive with the sent data into your computer.
3. In the **Share Data Using a File** section, select **Receive Data** to pull the data into your machine.

   Since you're receiving from a flash drive, it is not necessary to select names in the team roster section.

4 In the **Select the Drive / Folder you want to transfer from** window, select the location and file to receive (<EventID>-<Surveyor ID>, e.g., 2EN911-50250).

5 Select **Open** to initiate the data transfer to your computer.

A Transfer Progress window appears (often very briefly). When the transfer is complete, a notification lets you know if the data receive was successful or not. If the data share failed, this window lets you know what didn't transfer, and why.

6 If the data share was successful, select **OK**.

7 Select **Open** to initiate the data transfer to your machine.

The Transfer Progress window appears. For the team coordinator, conflicts (if any) are listed during the transfer process for resolution.

8 When the transfer concludes successfully, select **OK** in the confirmation message.

The survey on your machine now contains the updated information that the TC sent.

More ...

"Open the Data Sharing screen" on page 39
"RO/CO Data Share Using USB/File" on page 44
"Data Sharing Checklists" on page 220

Share Data Via Email

From LTCSP, you can email a survey with associated LTCSP data to one or more recipients, by creating a data share file containing the survey as an attachment to the email.

To share data via email:

1 Save the survey file to data share to a file location on your computer.

2 Open your email, and attach that file to an email message to the desired team coordinator/team member (TC/TM).

3 The receiving TC/TM saves the attached data share file on their computer.

4 On the Survey Team Data Sharing screen, select **Receive Data**.

If you are the TC, you must select the TM you are receiving the data share file from, and then select **Receive Data**.

5 In the **Select the Drive / Folder you want to transfer from** window, select the location and file to receive (<EventID>-<Surveyor ID>, e.g., 2EN911-50250).

6 Select **Open** to initiate the data transfer to your computer.

The Transfer Progress window appears. For the team coordinator, conflicts (if any) are listed during the transfer process for resolution.

7 When the transfer concludes successfully, select **OK** in the confirmation message.

The survey on your machine now contains the updated information that the TC/TM sent.

Share Data Across a Network

Survey team members can share encrypted LTCSP data across a network with a secured wired or wireless connection. A wired connection exists when multiple computers are physically connected to each other, or to a secured router with a cable. A wireless connection exists when multiple computers access the same secured wireless router.

Only the team coordinator can initiate data sharing across a network, whether wired or wireless. The procedure is the same for both. Data is copied across the network from specified team member(s) to the TC's computer, then the updated data is copied from the TC's computer back across the network to the team member(s).

Note: A TC can initiate data sharing using a network at any time during the survey.

To share data across a network:

1 If necessary, connect any computers from/to which you want to transfer data.

That could mean connecting to the team's secure server with a cable or wirelessly, or in the case of a direct connection, plugging a cable into the team member computer(s) and team coordinator's computer.

2 Open the **Survey Team Data Sharing** screen.

3 Select the checkbox to the left of the surveyor(s) you want to share data with.

4 For each selected team member, select the applicable **Server** (computer).

TIP: You may need to select Reload Server List to make sure the list of server IDs is current. The search and update may take several minutes. If the Reload Server List function does not find a team member's server ID when data sharing over a wireless network, you can enter the team member's computer IP in the IP column to complete the transfer.

5 Select **Share Data Now** to initiate the data transfer.

When the data share begins, the Transfer Progress window appears.

Message(s) appear if there is an issue with starting the transfer, e.g., you selected a server ID but not the checkbox for a surveyor.

Notification(s) appear when data conflicts prevent synchronization, e.g., a resident is assigned to two surveyors. The LTCSP application uses pre-defined rules to resolve most data conflicts, but if a notification appears, you (the TC) must resolve the conflict.

6 When the transfer and synchronization concludes successfully, select **OK** in the confirmation message.

This confirmation indicates that the survey data was first copied *from* the selected team member(s), then *to* the team member(s). That is, the survey data was copied from the team member(s) to your computer and then the updated survey data was sent back to the team member(s).

More ...

"Open the Data Sharing screen" on page 39

"Data Sharing Checklists" on page 220

Data Sharing for RO/CO Users

Regional Office, Central Office, and CMS contract (RO/CO) users must adhere to additional security requirements when sharing data, both when using a USB/file, or wired/wireless methods. When a survey team consists of state and RO/CO users, special measures must be taken.

- The survey team must use the state configuration.
- Some states may provide an RO user with a pre-configured state computer for the survey. In these instances, the state configuration is used, and there are no special considerations.

The following instructions are for RO/CO users if the state survey team is data sharing using a USB drive/file or a wired/wireless connection.

RO/CO Data Share Using USB/File

Although LTCSP automatically encrypts the data when it is shared, RO/CO users are required to encrypt any USB/flash drive in order to send and receive files on it. For survey teams with both state and RO/CO users, data sharing using a USB drive may not work due to incompatible encryption methods, and testing whether it works may end up encrypting a flash drive and making it unusable. In that case, it may be necessary to share files via email.

To send data to a flash drive for sharing:

1 Open the **Survey Team Data Sharing** screen.

2 Insert the flash drive (USB) into your computer.

3 When you insert a USB stick into an RO/CO user's machine, the CMS Check Point Encryption application automatically asks to encrypt the USB stick if it is not already CMS encrypted.

Note: If the USB has embedded default encryption, it must be formatted in FAT32 format (Standard format for removable devices). CMS Check Point encryption automatically creates dual partition storage on the stick: Drive E: Business related (Encrypted by CMS), and drive D: Non Business (no encryption).

4 Enter and confirm a password for the USB stick encryption, then select **Continue**.

Both sender and recipient must use the same password.

5 On the **Survey Team Data Sharing** screen, select team member(s) for data sharing if you are the team coordinator. If you are a team member, you must select the team coordinator.

Team coordinators can share data with all team members, but team members can only share data with the TC.

6 In the **Send Data Using A File** section, select **Send Data**.

7 In the **Select the Drive / Folder you want to transfer to** window, select the USB as your transfer location. i.e., Business Data - Encrypted (E).

The default transfer filename is <EventID>-<Surveyor ID>, e.g., 2EN911-50250.

Note: For Non Business storage, any files coming out from the CMS laptop cannot be saved to a D: non-Business storage location (with no encryption).

8 Select **Open** to initiate the data transfer.

A Transfer Progress window appears (often very briefly). When the transfer is complete, a notification lets you know if the data share was successful or not. If the data share failed, this window lets you know what didn't transfer, and why.

9 If the data share was successful, select **OK**.

To receive shared data from a flash drive:

1 If necessary, open the **Survey Team Data Sharing** screen on your (the receiving TC's/member's) computer.

2 Insert the flash drive with the sent data into your computer and enter the encryption password if asked.

Both sender and recipient must use the same password.

3 In the Share Data Using A File section, select **Receive Data** to pull the data into your machine.

Since you're receiving data from a flash drive, you don't have to select names in the team roster section.

4 In the **Select the Drive/Folder you want to transfer from** window, select the file to receive from the E drive or Business Data - Encrypted (E) location, and select **Open**.

A Transfer Progress window appears (often very briefly). When the data share is complete, a notification lets you know if the data share was successful or not. If the data share failed, this window lets you know what didn't transfer, and why.

5 If the data share was successful, select **OK**.

RO/CO Data Share Across a Network

RO/CO computers are already configured to share data across a secured wired or wireless network. However, you are required to disconnect from the CMS Cisco Connect VPN before you can begin sharing your LTCSP data.

After you have disconnected from the CMS Cisco Connect VPN, the process for sharing data using a network is the same as the state method.

To disconnect from CMS VPN:

1 Launch the **Cisco AnyConnect Secure Mobility Client** application from the desktop or system tray, or you can search for it in the Start menu.

2 On the **Cisco AnyConnect Secure Mobility Client** window, select **Disconnect**.

Note: Internet access and CMS email will be disconnected.

To reconnect CMS VPN:

1 Connect to a secured network location or internet access point.

1 Launch the **Cisco AnyConnect Secure Mobility Client** application from the desktop or system tray, or you can search for it in the Start menu.

2 On the **Cisco AnyConnect Secure Mobility Client** window, select **Connect**.

3 Enter your PIV card PIN.

After connecting successfully, you can minimize or close the Cisco AnyConnect Secured Mobility Client window.

More ...

"Share Data Across a Network" on page 43

Team Meeting

The Team Meeting screen is available only to the team coordinator. The survey team meets as needed throughout the survey. The Team Meeting screen provides information to facilitate team discussion. Some information is entered by the TC, and some information is automatically updated each time the TC opens the screen. After data sharing with the team, all team members' data is included on this screen.

Day 1 questions deal mainly with the initial pool such as how many residents each surveyor included in the initial pool. Day 1 also lists remaining work that each surveyor needs to complete for their initial pool. Day 2 questions focus more on concerns and survey workload such as how much work each surveyor has left. These questions help the team gauge the status of the survey and make decisions for the next steps.

To enter and review Team Meeting information:

1 From the **Navigation** menu, select **Team Meeting**.

The Team Meeting screen opens to Day 1.

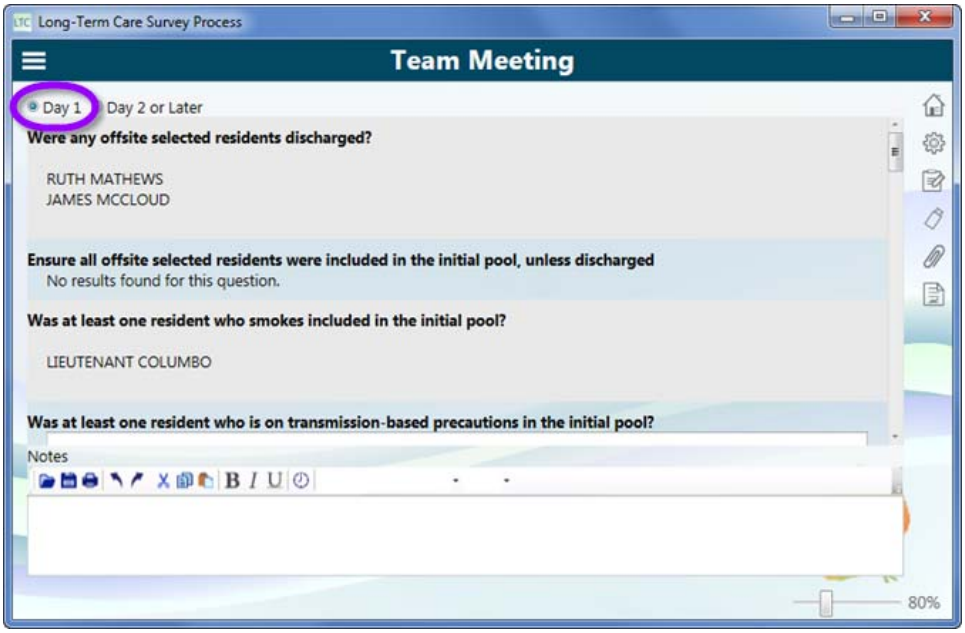


Figure 33: Team Meeting screen—Day 1

2 Review and enter Day 1 team meeting information and notes about any issues.

The system indicates if no information is available for system-generated entries.

3 To enter and view Day 2 or later team meeting information, select **Day 2 or Later**.

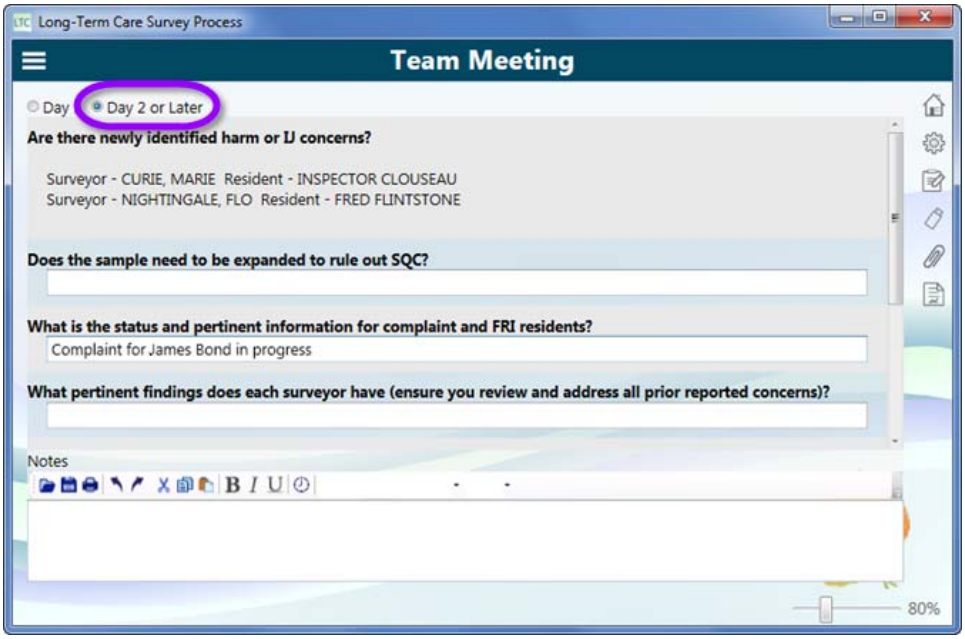


Figure 34: Team Meeting screen—Day 2 or Later

4 To print Team Meeting information as a report, click the **Reports** icon in the **Quick Access** menu, select **Team Meeting Notes**, and click the **Run Reports** button at the bottom of the dialog box.

Offsite Preparation

Before going out on a survey, the TC must do some preparation. The Offsite Preparation screen in LTSCP provides a place where the system automatically enters some information and the TC enters other information. This information helps guide the survey team while on the survey.

For example, to help ensure that a survey team covers the entire facility, the TC assigns areas of the facility to each survey team member. For this purpose, the TC uses the facility floor plan on file (for a recert, not an initial certification) and divides the facility among the team to ensure every area is covered. The surveyors screen **all** the residents in their assigned area.

If the survey is a combined complaint survey, complaint data is pulled from ACTS and appears in the LTCSP Offsite Preparation screen. The TC should review the complaints and make assignments as applicable once the survey has been imported.

Note: For specific instructions on attaching complaints to an LTCSP survey, refer to the *LTCSP Complaints Guide* posted at https://qtso.cms.gov/software/ltcsp/reference-manuals.

Enter Offsite Prep Information

Only the team coordinator can make changes to information on the Offsite Preparation screen in LTCSP; however, all team members can view the information.

To enter offsite prep info:

1 From the **Navigation** menu, select **Offsite Prep**.

Some information has already been provided.

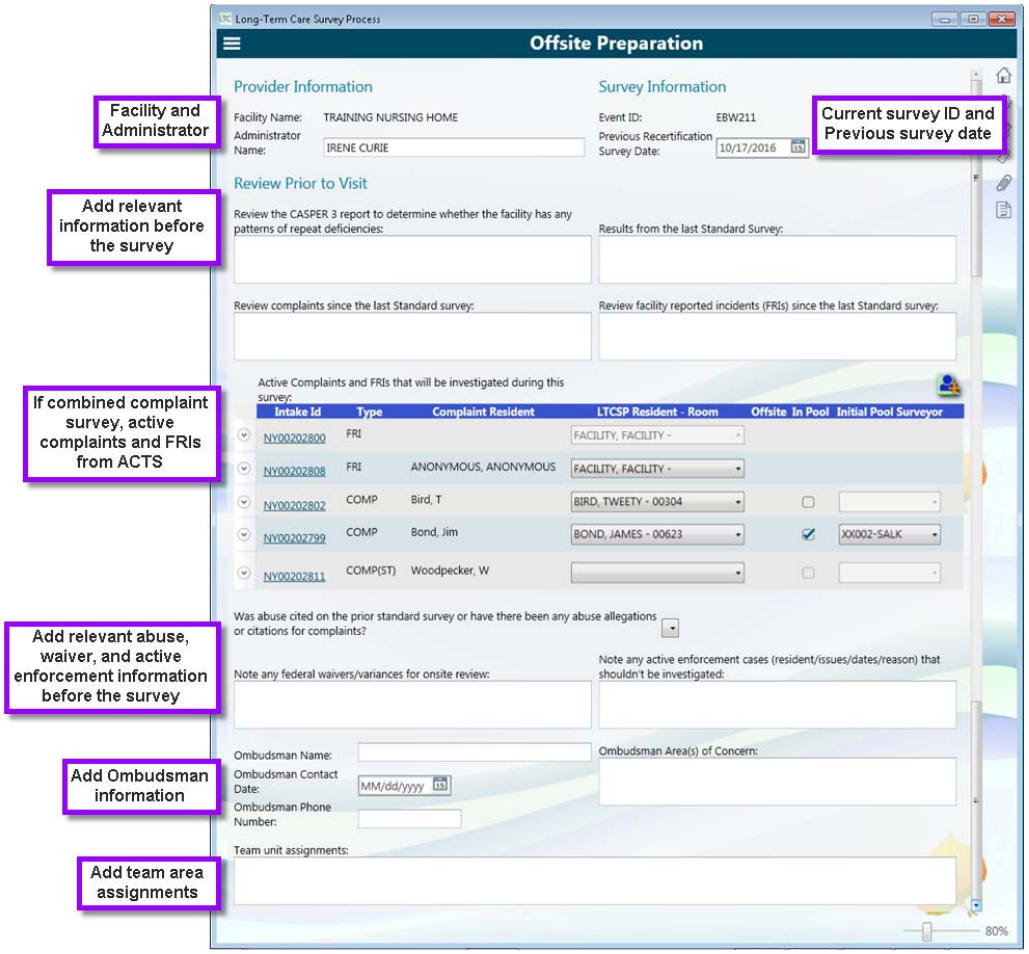


Figure 35: Offsite Preparation screen

2 In the **Review Prior to Visit** section, enter patterns of repeat deficiencies, results from the last Standard survey, complaint/FRI history, and active complaint/FRI information (e.g., specific allegations).

3 If a combined complaint survey, review and make assignments in the Active Complaints and FRIs section.

4 Answer the abuse question below the Active Complaints section.

5. As applicable, add federal waivers/variances, active enforcement cases, and Ombudsman information.
6. Scroll to the bottom of the screen to the **Team unit assignments** section and enter team assignments.
7. Open the **Facility Tasks** screen to assign mandatory facility tasks.
8. From Reports (see "Generate Reports" on page 33), print the Facility Matrix with instructions, the Entrance Conference Instructions, and the Beneficiary Notice worksheet.
9. Share offsite prep data with the team.

Active Complaint and FRI data

When you have a combined complaint survey, the active complaint and FRI information is pulled from ACTS when you export the survey from ACO and appears on the Offsite Preparation screen. The TC can use this information to add complaints/FRIs to the survey

For each complaint or FRI the TC can:

- Review intake information
- Select complaints/FRIs to be included with the survey (you will receive a warning if you select more than 5 for the initial pool; you can add more to the survey later by initiating an investigation)
- Match complaint/FRI residents to MDS residents or add a resident not in the MDS resident list

- Match anonymous complaints/FRIs to the Facility
- Add applicable initial pool care areas, investigations, or facility tasks
- Assign selected complaints/FRIs to surveyors

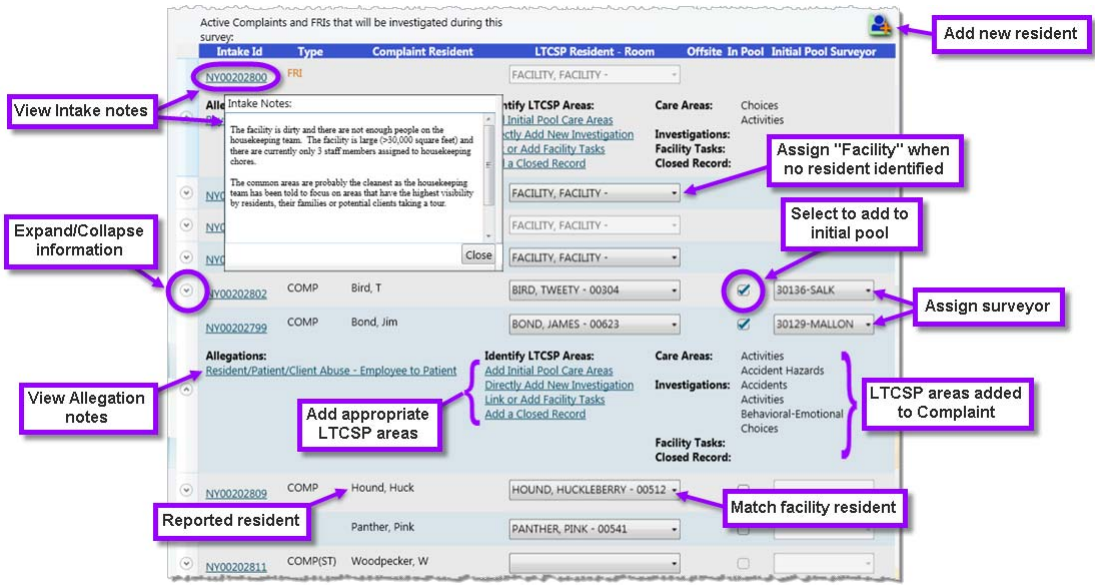


Figure 36: Active Complaint and FRI section of the Offsite Preparation screen

After reviewing the complaints and FRIs, the TC determines which should be added to the initial pool. Those complaints and FRIs added need to be assigned appropriate LTCSP areas and then assigned to a surveyor. All this can be done from the Offsite Prep screen.

To add a complaint/FRI resident to the initial pool:

1. On the **Offsite Preparation** screen, click the Expand/Collapse arrow to view the Complaint/FRI information.
2. Click the Intake number or the Allegation name to view the notes (usually one of the two has been filled out). Click **Close** to close the notes box.
3. Identify the complaint resident and select from the **LTCSP Resident Roster**.
   - In the **LTCSP Resident Roster**, scroll to match the reported Complaint Resident to the MDS name and select.
   - If the resident is not in the list, click the **Add New Resident** icon to add the resident to the survey and then use the roster to add the new resident to the complaint or FRI.
   - If no resident has been identified, select **Facility, Facility** from the list. The system then adds this to all anonymous complaints and FRIs.

4 Based on the allegations, select the appropriate LTCSP area(s) for the complaint or FRI resident. These links become active when you assign the LTCSP Resident.

- **Add Initial Pool Care Area**: Associates the complaint resident with a care area on the Interview/Observation/Record Review screens. A Complaint link appears next to the assigned care area.
- **Directly Add New Investigation**: Use the Initiate One or More Investigations dialog to select investigative area and assign a surveyor.
- **Link or Add Facility Task**: Select one or more tasks to add to the survey for the complaint.
- **Add a Closed Record Review**: Select the Reason and provide a description.

LTCSP areas added are listed on the screen.

5 When you decide to add a complaint resident (or Facility) to the initial pool:

Note: You can add an investigation to any complaint/FRI resident without adding them to the initial pool.

- Select the checkbox in the **In Pool** column—this also activates the surveyor drop-down list and updates the Initial Pool status to Yes in Resident Manager.
- In the **Initial Pool Surveyor** column, select a surveyor—this assignment also appears in Resident Manager.

Note: If you select more that five complaints/FRIs to add to the initial pool, a warning appears. For detailed instructions on complaints, refer to the *Long Term Care Survey Process (LTCSP) Procedure Guide* (In LTCSP: **Navigation** menu | **Resources** | **Procedures Guide**).

Complaints and FRIs Information during the Survey

The **Complaint** or **Facility Reported Incident** subgroups are added to the selected residents. A **Complaint** link appears on any relevant screens—click to bring up a list of Complaints/FRIs with intakes relevant to that area. Use the expand/collapse arrows to view the same information that is on the Offsite Prep screen.

Initial Pool Care Areas: A Complaint link appears on the Interview, Observations, and Record Review screens beneath the MDS indicators and next to any Care Areas linked to a complaint/FRI for that resident. Anonymous complaints/FRIs links appear for every resident.

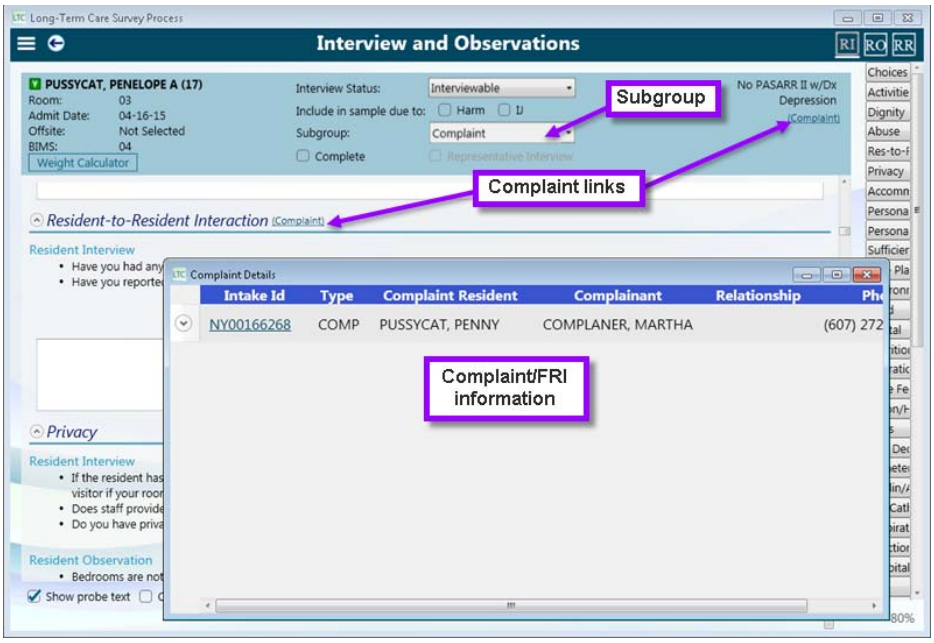


Figure 37: Interview and Observations screen with Complaint information

Facility Tasks: COMP appears on main screen and a Complaint link appears next to the Pathway link in the Function toolbar. For any resident added to a facility task, a Complaint link appears next to their name in the resident list.

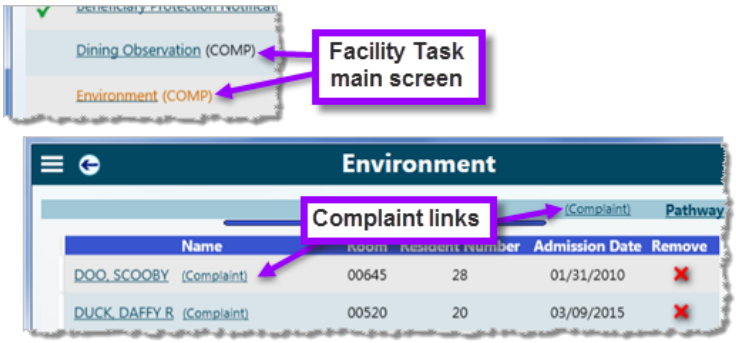


Figure 38: Complaint notation and links in facility task screens

Investigations: Comp is noted in the Inv. Reason column and a Complaint link appears next to the investigation title.

Figure 39: Complaint notation and links in investigations screens

Sample Screens: Sample by Resident and Sample by Care Area indicate Complaint Care Areas. Closed Record Review indicates complaint residents.

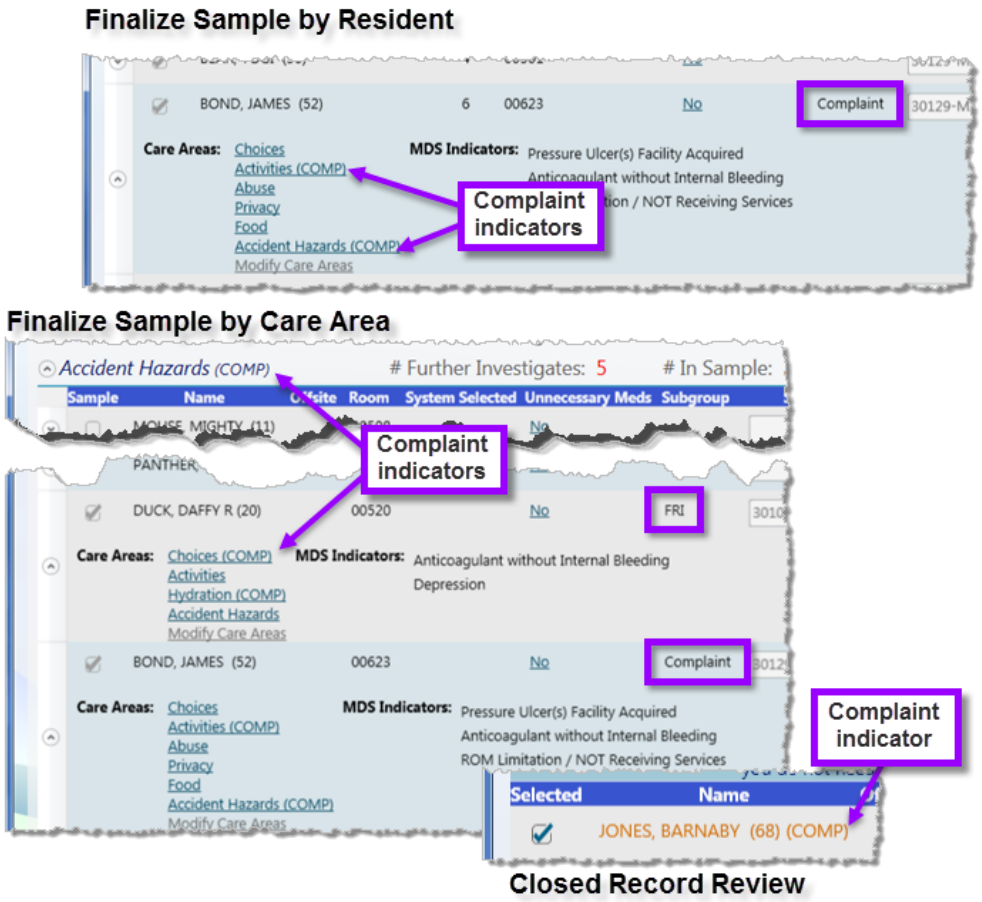


Figure 40: Complaint notation and links on sample and Closed Record Review screens

Potential Citations: When a tag that came from a complaint is cited, the **A-Complaint Investigation** citation category is automatically selected.

Note: For specific instructions on adding complaints to an LTCSP survey already in progress, refer to the *LTCSP Complaints Guide* posted at https://qtso.cms.gov/software/ltcsp/reference-manuals.

Anonymous Complaints and FRIs

Since no one resident can be linked to an anonymous complaint or FRI, a Complaint link appears on relevant screens. If a complaint or FRI has been linked to an Initial Pool Care Area, Complaint links appear for every resident on the Interview, Observations, and Record Review screens.

More ...

"Assign Facility Tasks" on page 113
"Generate Reports" on page 33
"Data Sharing" on page 39

Entrance Conference

Upon entering the facility, the team gives a copy of the Entrance Conference form to the facility for them to complete. The Entrance Conference screen provides a place to enter notes and to check off items on the form as they are completed.

Multiple documents of various formats can be attached and are transferred as part of the data sharing process. The information helps guide the survey team while on the survey.

Note: Only the team coordinator can enter notes for the entrance conference; however, all surveyors can view the information after data share.

To enter data on the Entrance Conference screen:

1 From the **Navigation** menu, select **Entrance Conference**.

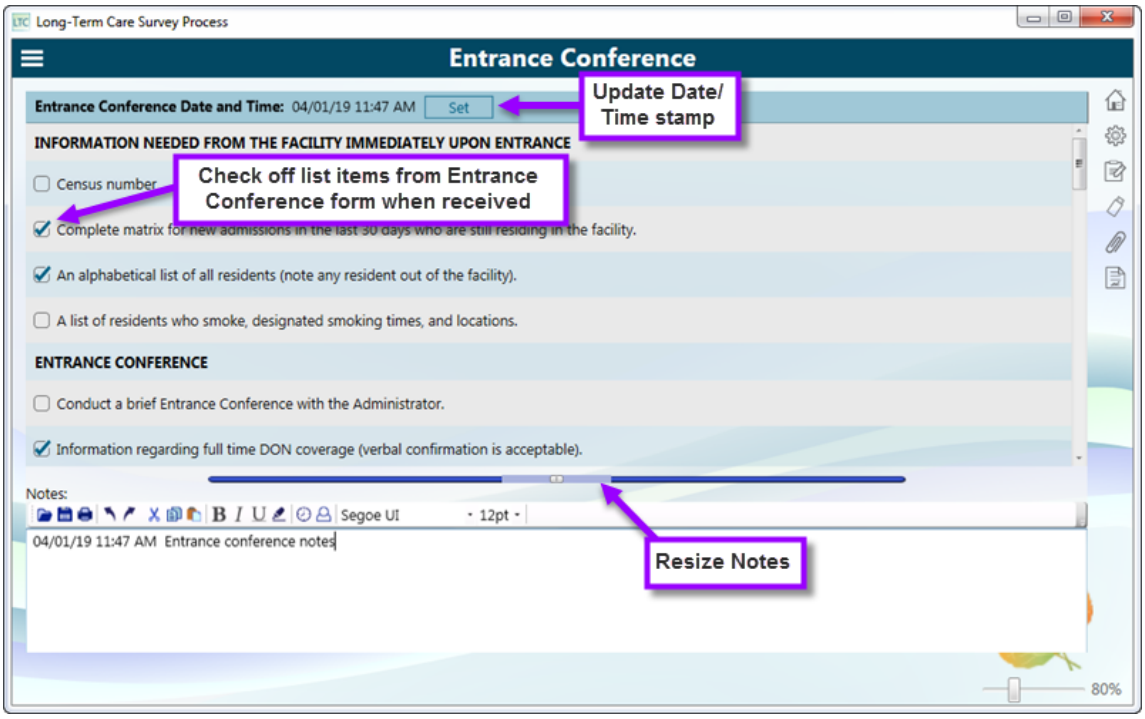


Figure 41: Entrance Conference screen

2 Review the screen:

- Entrance Conference Date and Time—automatically records when the entrance conference screen is opened for the first time (at the top of the screen), but if this is not the actual start time you can reset the time and date. Click **Set** to update the current Date and Time.
- Entrance Conference form checklist—the TC can check off items as the facility provides information.
- Notes—area for TC to enter entrance conference notes.
- Expander bar—adjusts the size of the form and notes areas.

3 Enter notes about the entrance conference at the bottom of the screen.

To print the Entrance Conference Instructions for the facility:

1 Click the **Reports** icon in the **Quick Access** menu, or press **Alt + P**.

2 On the **Reports** screen, select the box for **Entrance Conference Instructions**, which is listed in the first section of the Reports window when you are on the Entrance Conference screen.

3 Click the **Run Reports** button to generate a PDF of the report.

4 Print the PDF.

5 Click **X** to close the **PDF** window and **Done** to close the **Reports** screen.

More ...

"LTCSP Notes" on page 24
Procedure: "Adjust Facility Census" on page 98

Resident Manager

The residents listed in the Resident Manager screens are generated by the system based on Minimum Data Set (MDS) data. When the survey shell is exported from ACO/ARO into ASE-Q, the MDS data is used to:

- Identify all residents still in the facility with an assessment within the last 180 days.
- Calculate MDS indicators for each resident, and then determine facility rates for each indicator.
- Flag residents as offsite selected based on:
  - Number of assessments/residents included with the exported survey shell
  - Residents with the highest number of indicators that reflect the facility rates.

  A resident qualifies for the offsite selected group only if they've had an assessment in the last 120 days.

The Resident Manager screens in LTCSP are used by the survey team to:

- Add newly admitted residents who did not have MDS data from the last 120 days and therefore are not listed in Resident Manager.
- Identify residents for the initial pool process.
- Identify the appropriate subgroup(s).
- Update a resident's information such as room number.
- Provide access to Interviews, Observations, and Record Review screens for any resident included in the initial pool.
- Provide status of resident interview process to help manage work.
- Search for a resident by name or room number.

Open the Resident Manager

The Resident Manager is opened from the **Navigation** menu. There are two different views, List and Card. Surveyors can choose the view they prefer and can switch between the views.

To open the Resident Manager:

1. From the **Navigation** menu, select **Resident Manager**.

   This opens the Residents screen in List view.

2. To switch between views, click the **Card View** or **List View** icon at the upper right of the screen.

Resident Manager views

There are two different views that can be used to manage residents:

- **List view**

  The default Residents list view displays residents alphabetically by last name. Use the Sort function to change the sort as desired and Filter to see specific residents.

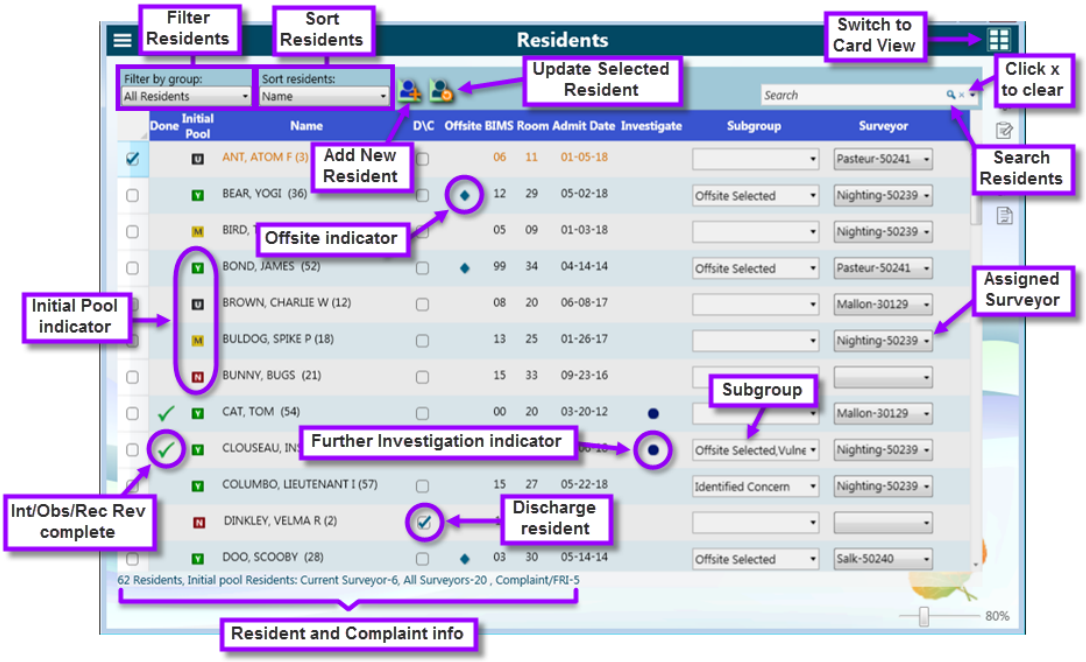


Figure 42: Navigation features in Residents screen–List view

- **Card view**

  Individual cards display resident information. The screen title displays Incomplete Residents and changes to Residents when all are completed.

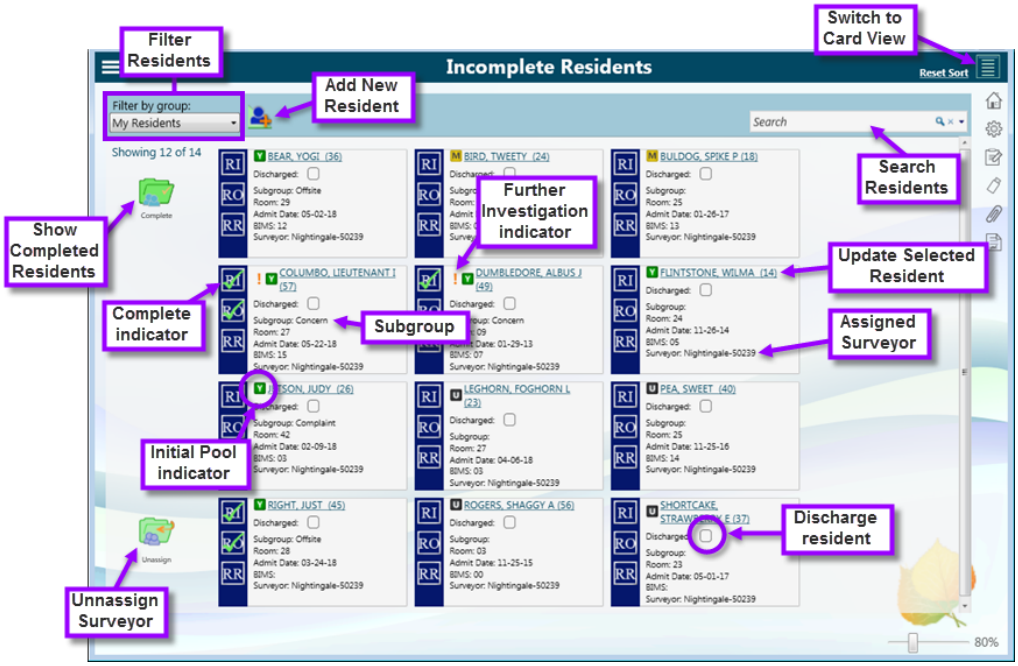


Figure 43: Residents–Card view

Most functionality is available in both views; however, some functions are easier to perform in one view versus the other. Surveyors can use their preferred view or switch between views depending on the task they are performing.

Resident Manager Filter and Sort

The Filter and Sort functions let you display only the residents you need to see. You can filter residents in both List and Card views by group, and sort residents in List view by category.

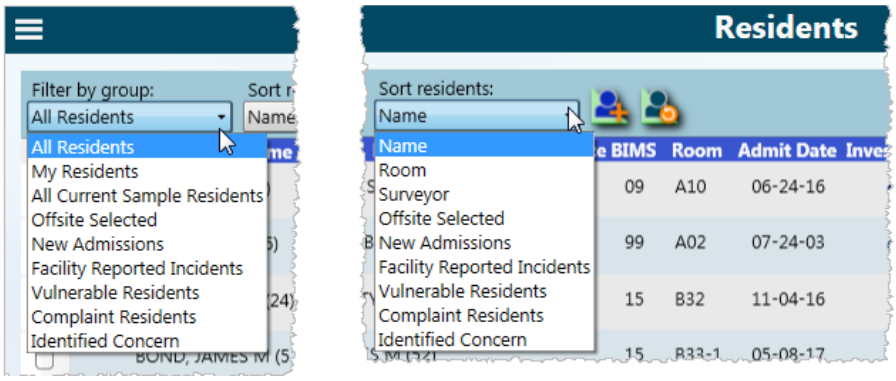


Figure 44: Filter and Sort options

Filter by group

The Filter by group drop-down menu, located on the left side of the function bar, allows you to view the following groups of residents:

- **All Residents**: All residents from MDS data plus any added by surveyors
- **My Residents**: All residents assigned to you
- **All Current Sample Residents**: All system-selected residents included as sample candidates:
  - Offsite selected residents with at least one area marked for Further Investigation (FI)
  - Any initial pool resident with FI marked for abuse
  - Any initial pool resident the surveyor marked Harm or IJ
- **Offsite Selected**: All residents preselected by system from MDS data
- **New Admissions**: All residents noted by surveyors as being admitted within the last 30 days
- **Facility Reported Incidents**: Residents associated with an official facility reported incident that the survey team is investigating with the survey
- **Vulnerable Residents**: Residents marked as vulnerable by surveyors
- **Complaint Residents**: Residents associated with an official complaint made to the state that the survey team is investigating with the survey
- **Identified Concern**: Residents who are not in any of the above subgroups. but are noted by surveyors as having a specific concern

To filter residents by group:

1. In either **List** view or **Card** view, click the arrow in the **Filter by group** box to see the list of filter choices.
2. Select the desired group.

   The screen refreshes to display only those residents belonging to that group.

More ...

"Resident Manager Tips" on page 197

Sort residents

The Sort residents drop-down menu, located to the right of the Filter by group menu in List view, allows you to sort the residents according to the following categories:

- **Name**: Lists residents alphabetically by last name.
- **Room**: Lists residents by room number in ascending order. Residents without a room number are listed alphabetically by last name at the top of the list.

- **Surveyor**: Lists residents assigned to surveyors by surveyor number. Residents not assigned to a surveyor are listed alphabetically by last name at the bottom of the list.
- **Offsite Selected**: Lists residents preselected by the system at the top of the list.
- **New Admissions**: Lists residents with the subgroup New Admissions at the top of the list.
- **Facility Reported Incidents**: Lists residents with the subgroup FRI at the top of the list.
- **Vulnerable Residents**: Lists residents with the subgroup Vulnerable at the top of the list.
- **Complaint Residents**: Lists residents with the subgroup Complaint at the top of the list.
- **Identified Concern**: Lists residents marked with the subgroup Identified Concern at the top of the list.

Although the Sort residents menu is not available in Card view, the sort option selected in List view is applied to Card view.

TIP: You can apply a sort to any group you filter by, not only the full resident list.

To sort residents by category:

1. In **List** view, click the arrow in the **Sort residents** box to see the list of categories.
2. Select the desired category.

   The screen refreshes to display residents in the specified order.

More ...

"Resident Manager Tips" on page 197

Search Residents

The **Search** field lets you locate residents by name or room number in List and Card views. A history of searches is kept so you can conveniently repeat searches.

Note: Partial name or number searches do not work.

Figure 45: Search field in Card view

To search for a resident:

1. In the **Search** box, type full first name, last name, or room number and press Enter or click the magnifying glass.
2. To repeat a search, click the down arrowhead and select the desired search text.
3. Click the **x** in the **Search** box to clear the search results.

Note: Until you select X, the screen will only show the search results.

More ...

"Resident Manager Tips" on page 197

Initial Pool

There are many ways to organize the initial pool. One option is the team coordinator assigns area(s) of the facility to each surveyor. Surveyors visit room to room to screen all residents in their assigned area(s) in order to identify residents for their initial pool. The goal of each surveyor is to conduct an interview, observation, and limited record review with the residents in their initial pool. It is from the initial pool (for all surveyors) that the survey team pulls residents into the sample.

Surveyors set the Initial Pool (IP) Status to Yes to add a resident to the initial pool. Only residents with an Initial Pool status of Yes appear on the Finalize Sample screen. Offsite residents automatically have an IP status of Yes and must be included unless they have been discharged.

Up to five complaint and FRI residents, when designated by the team coordinator on the offsite prep screen, are automatically included in the initial pool and sample for the team and will have an IP status of Yes.

Surveyors can include any other resident in their initial pool by setting the IP status to Yes on the Resident Manager screens, the Interview, Observations, and Record Review screens and in the Add/Update resident dialogs.

During the screening process, surveyors can use all the IP statuses to help organize their residents. LTCSP assigns the IP status Unknown to all non-offsite

residents. You can change this to Maybe during screening to identify possible residents for your initial pool. Select No to remove a resident from the initial pool (offsite residents require a discharge reason).

Only an IP indicator of Yes activates the interview, observation and record review screens. The RI, RO, and RR screens remain read-only for any other IP indicator status (U, N, or M).

More ...

For detailed instructions on performing the initial pool process, refer to the *Long Term Care Survey Process (LTCSP) Procedure Guide* (In LTCSP: Navigation menu | Resources | Procedures Guide).

Offsite Selected Residents

When you export the survey shell from ACO/ARO, the system identifies the residents in the facility and does MDS indicator calculations. This information is included with the survey shell imported into ASE-Q. From these calculations, some residents are pre-selected to be included in the initial pool during the survey and automatically have an IP status of Yes. They are referred to as offsite selected residents and must be included in the initial pool unless they no longer reside at the facility.

The number of offsite selected residents depends on the number of residents included with the survey shell and the required sample size needed for investigation. The offsite selected residents comprise 70% of the sample and your team will fill in the remaining 30%. For example, if the facility MDS data shows 100 residents currently at the facility, the Target Sample Size will be 20. Of those 20, 14 will be pre-selected by the system and added to the sample if concerns are identified.

Once onsite, surveyors do not need to consider maintaining a 70/30 split between offsite and onsite selected residents. The focus is on identifying residents for the initial pool and sample based on concerns.

Note: Since each surveyor needs to cover a certain area of the facility, some surveyors may have a higher number of offsite selected residents in their initial pool than others.

Include Resident in Initial Pool

Surveyors can manage their residents using the Initial Pool (IP) status available in the Resident Manager, Interview, Observations, and Record Review screens. Only those with an IP status of Yes will be included in the initial pool and only these residents appear in the Finalize Sample list.

Click an IP status icon to open the IP status dialog which provides basic resident information and their MDS indicators.

Offsite selected residents have IP status values of

- **Yes**—default; required to proceed with interview/observation and sampling
- **No**—removes from initial pool; requires a reason

For the remaining residents you can set an IP status of

- **Unknown**—default
- **Maybe**—mark residents during initial screening as possibilities for IP or that the resident is unavailable, for example, the resident isn't in the room
- **Yes**—required to proceed with interview/observation and sampling
- **No**—removes from initial pool; removes surveyor assignment

The system will change the IP status of complaint residents added to the initial pool in Offsite Prep to **Yes**.

Surveyors can set the IP status on the following:

- Resident Manager List and Card view screens
- Interview & Observations screen
- Observations screen
- Record Review screen
- Add/Update Resident dialog

Click the icon on a screen to open the IP selection dialog for that resident.

From the Resident Manager List View:

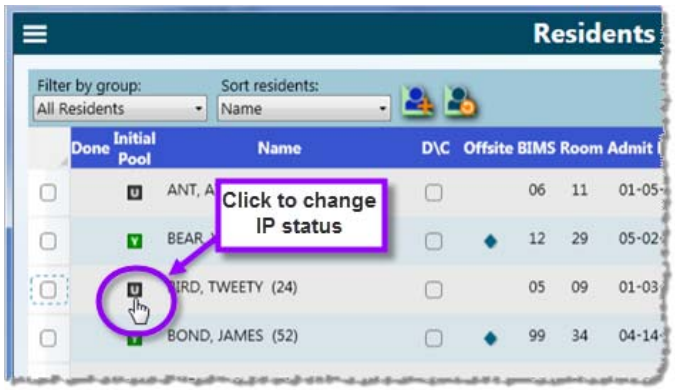


Figure 46: IP Status icon on Resident Manager List View

From the Resident Manager Card View:

Figure 47: IP Status icon on Resident Manager Card View

From Interview, Observations, or Record Review screens:

Figure 48: IP Status icon in Interview, Observations, or Record Review screens

From the Add/Update Resident dialog:

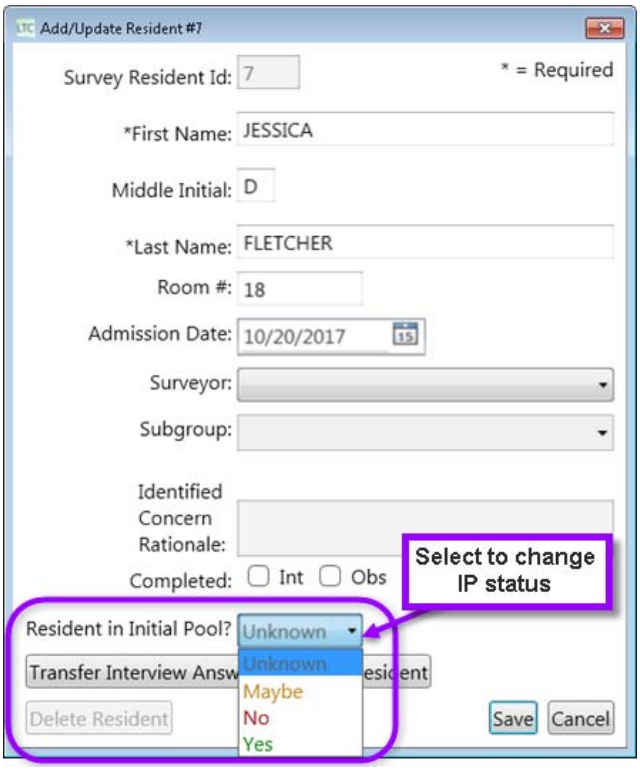


Figure 49: IP Status selection in the Add/Update Resident dialog

Note: Only residents with an IP of Yes appear on the Finalize Sample screen regardless if any Further Investigations were marked during the interview process.

To include a resident in your initial pool:

1 Open the **Resident Manager List View** or **Card View** screens, or open the **Interview**, **Observations**, or **Record Review** screen for the resident.

2 Click the **Initial Pool** icon to open the selection box:

➥ For an Offsite resident, **Yes** is default; select **No** and provide a reason.

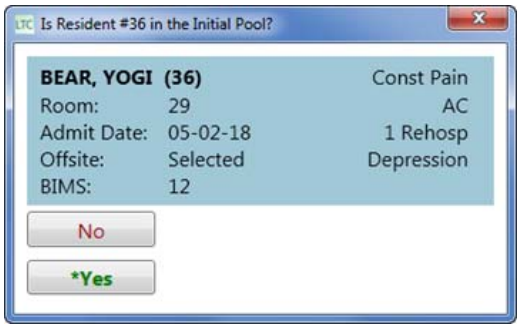


Figure 50: IP Status selection dialog for an offsite resident

➥ For a non-offsite resident **Unknown** is default; select **Maybe**, **Yes**, or **No**.

Figure 51: IP Status selection dialog for an offsite resident

TIP: The button with an * and bolded text indicates the current IP status. For example, if the status is Yes it appears on the button as ***Yes**.

3 Select applicable subgroups.

More ...

"Open the Resident Manager" on page 58
"Add a New Admission" on page 68
"Assign Surveyor to Resident" on page 71
"Assign Subgroup to Resident" on page 70

Add / Update Residents

You can add a newly admitted resident or update information for a current resident. If you duplicate a resident, you can delete the added resident as long as no data has been added to that resident.

Add a New Admission

When surveyors begin the initial pool process, the facility should provide them with a list of new admissions in their area. A new admission should be added to the resident list only if the surveyor includes the newly admitted resident in the initial pool (based on the screening) *and* the resident isn't already included in the resident list. The system automatically assigns a unique ID to each new admission added to the resident list. The process is the same in both List and Card views.

To add a new admission:

1. Open the **Resident Manager**.
2. Click the **Add New Resident** icon to open the **Add / Update Resident** dialog.

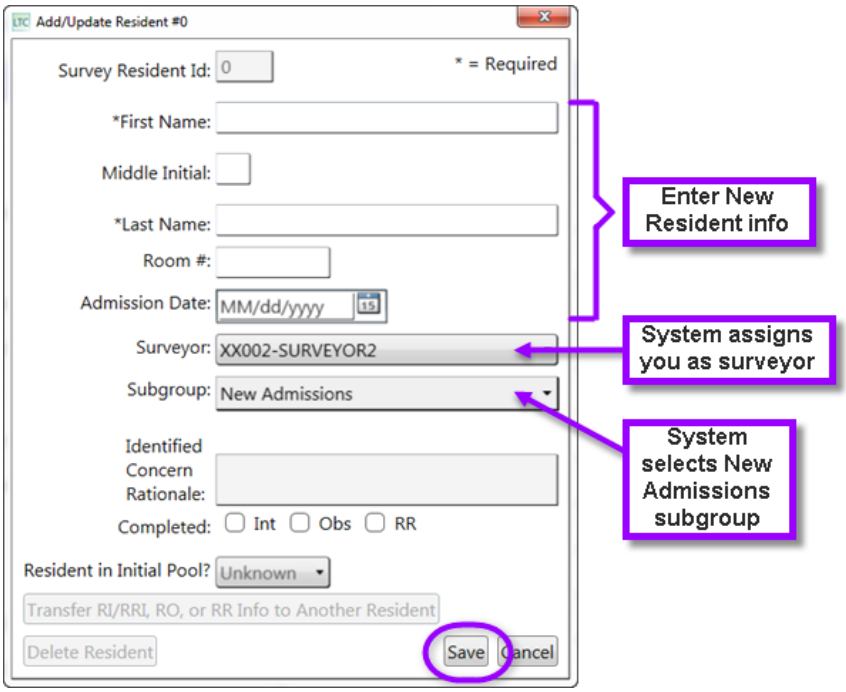


Figure 52: Add/Update Resident window

3. Enter resident information including **Name**, **Room #**, **Admission Date**.

   When you add a new admission, the system automatically assigns you as the surveyor.

4 The system automatically assigns the subgroup **New Admissions** to the resident to ensure high risk medications, diagnoses, and hospice are listed in the Record Review. Select any other subgroup(s), if applicable, in the Subgroup drop-down list.

When you add a new admission, the system assigns a unique ID for that resident (in parentheses after the name). To avoid any conflict, each surveyor is assigned a block of 50 numbers to use for the unique IDs.

5 Click **Save**.

To delete an added resident:

1 Open the **Add / Update Resident** dialog for the duplicate resident (you can only delete residents added by the team not those on the MDS resident list).

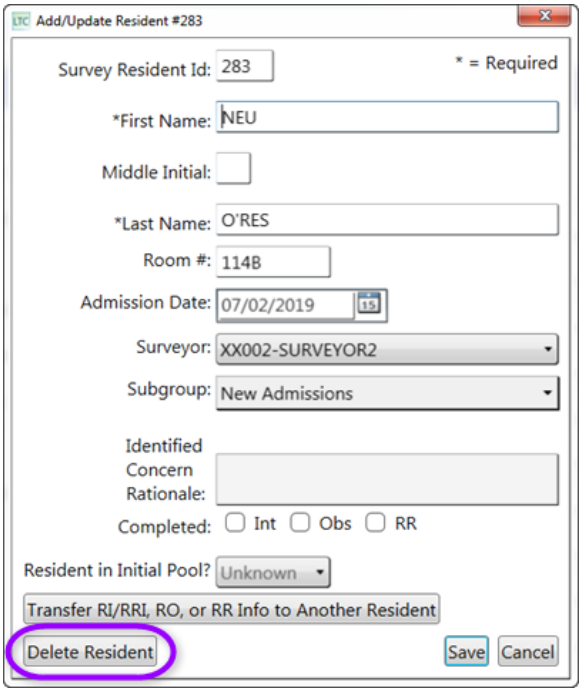
From the List view, select the resident's name and click the **Update Selected Resident** icon.

-or-

From the Card view, select the resident's name.

2 Click the **Delete Resident** button at the bottom of the dialog box.

If the resident has data associated to their ID or is found associated with a task you will receive a warning and the resident will not be deleted. Remove or transfer the data to the correct resident to delete.



Add/Update Resident dialog—Delete Resident

More ...

"Open the Resident Manager" on page 58
"Assign Subgroup to Resident" on page 70

Update Resident Information

Basic resident information such as room number or name can be changed by surveyors. These changes do not affect the MDS data and are only used to help surveyors in the field.

To update resident information:

1. Open the **Resident Manager**.
2. In **List** view, select the checkbox for the resident, then click the **Update Resident** icon.

   -or-

   In **Card** view, click the resident name on the card.
3. In the **Add/Update Resident** window, update resident information (e.g., First Name, Room #, IP status) as needed.
4. Click **Save**.

More ...

"Open the Resident Manager" on page 58

Assign Subgroup to Resident

If you decide to include a resident in the initial pool who is not offsite selected, or want to assign an additional subgroup to an offsite selected resident, you can assign one or more of the following subgroups to indicate why you chose to include the resident.

All applicable subgroups should be identified for each initial pool resident.

- All
- New Admissions
- Facility Reported Incidents
- Vulnerable Residents
- Complaint Residents (official complaints from ACTS)

If none of these reasons apply, but you feel the resident should be included in the initial pool, select Identified Concern and enter a description of the concern. Once Identified Concern is selected, all other subgroup options are grayed out. If any other subgroup(s) are selected, Identified Concern is grayed out; you must deselect any other subgroups in order to activate Identified Concern.

Subgroup(s) can also be assigned on the Resident Interview/Observation screen. For example, if you determine from observation that a resident is very dependent on the facility staff, you may want to mark that resident as vulnerable.

To add a subgroup to a resident:

1 Open the **Resident Manager**.

2 In **List** view, click the down arrow in the **Subgroup** field for the resident.

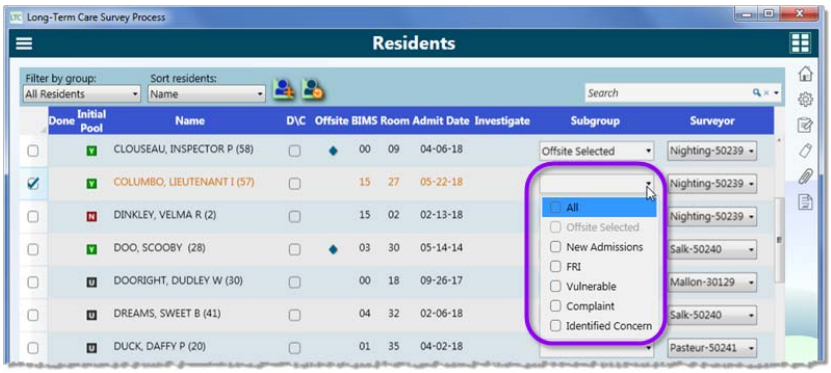


Figure 53: Subgroup options

3 Select the applicable option.

If you select Identified Concern, all other options gray out and you are required to enter a rationale for the concern.

TIP: Subgroup can also be assigned in the Add/Update Resident window, and Interview and Observations (RI) or Observations (RO) screens, all of which can be opened from List or Card view.

More ...

"Open the Resident Manager" on page 58
"Resident Manager Tips" on page 197

Surveyor Assignments

Team coordinators can assign survey team members to residents at any time, even before arriving at the facility (e.g., active complaints or offsite selected residents). Later, team member assignments may need to be changed and team members can make their own assignments.

More ...

"Balance the Survey Team's Workload" on page 105

Assign Surveyor to Resident

Surveyor assignments can be made in the Surveyor field in the Residents list or in the Add/Update Resident dialog for a selected resident.

Note: Team coordinators can assign any survey team member; team members can assign only themselves.

To assign a surveyor to a resident in List view:

1. Open the **Resident Manager**.
2. In **List** view, select the checkbox to the left of the resident.
3. From the **Surveyor** drop-down list, select the surveyor you want to assign to the resident.

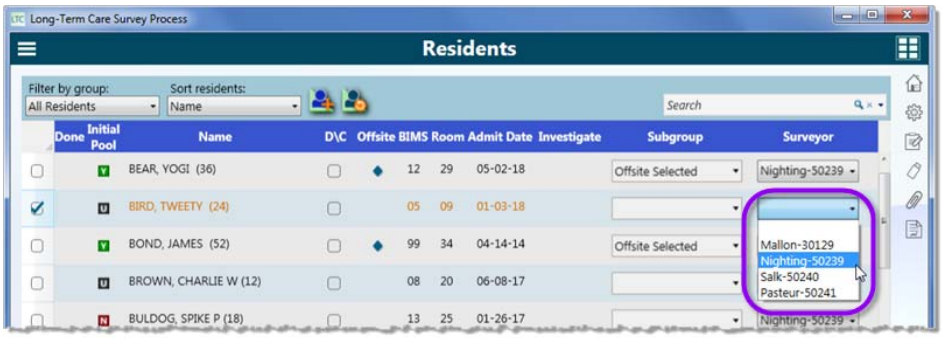


Figure 54: Surveyor drop-down list

TIP: In List view only, to assign a surveyor to multiple residents at once, select the checkbox for all applicable residents, then select the surveyor name for one of the selected residents and the surveyor name will be applied to all selected residents.

To assign a surveyor to a resident via Add/Update Resident:

1. In **List** view, select the checkbox for the resident, then click the **Update Selected Resident** icon.

   -or-

   In **Card** view, select the resident name on the card.

2 In the **Add/Update Resident** dialog, select the surveyor you want to assign from the **Surveyor** drop-down list.

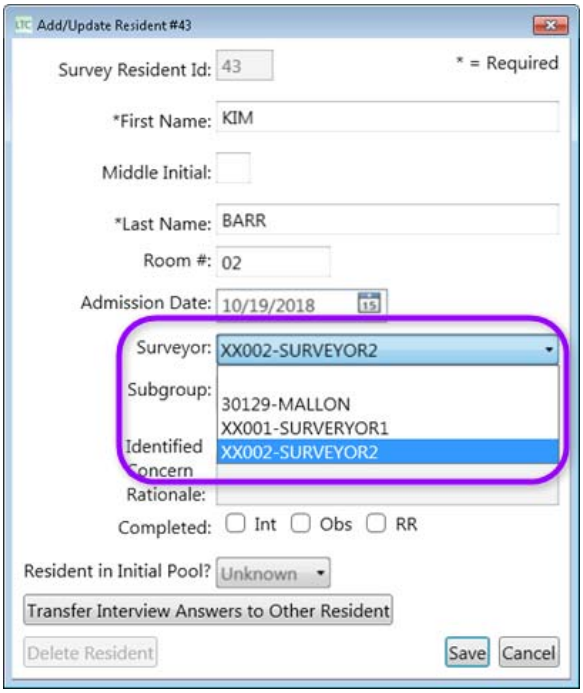


Figure 55: Assign surveyor to resident via Add/Update Resident

3 Click **Save**.

More ...

"Open the Resident Manager" on page 58

Change Surveyor Assignments

Use this function to change surveyor assignments for the initial pool. In Resident Manager anyone can change surveyor assignments—only one surveyor can be assigned to a resident during the initial pool interviews, observations, and record review. Once the sample is finalized, adjust surveyor assignments on the Investigations screen.

To change an existing surveyor assignment:

1 Open the **Resident Manager**.

2 In **List** view or the **Add/Update Resident** window, select the new surveyor you want to assign to the resident from the **Surveyor** drop-down list.

3 Click **Yes** in the reassignment confirmation message.

Note: Once the survey has been started, each surveyor will have to assign a different resident to themselves—data share will not assign a resident to another surveyor, so each surveyor maintains their own resident list after starting the surveyor.

More ...

"Open the Resident Manager" on page 58
"Assign Investigations" on page 133

Unassign Surveyor

All team members can unassign or reassign any survey team member; it is a good idea to communicate these changes to help with data conflicts during data sharing.

To unassign a surveyor:

1. Open the **Resident Manager**.
2. In **List** or **Card** view, open the **Add/Update Resident** window and select the blank option in the **Surveyor** drop-down.

   -or-

   In **Card** view, drag and drop the resident's card to the **Unassign** icon.

   -or-

   In **List** view, in the row for the resident open the Surveyor drop-down and select the blank line.

   -or-

   Change the IP status to **No** or **Unknown** (non-offsite only) for the resident.

   When you unassign a surveyor from an offsite selected resident, the LTCSP application requires a reason be specified: Expired, Hospitalized, Discharged to community, or Assign to another surveyor. Any offsite selected resident marked as Discharged is automatically added as a Closed Record Review candidate.

Note: When you unassign a non-offsite resident, the system automatically changes the IP status to **No**.

More ...

"Open the Resident Manager" on page 58
"Closed Record Review Sample" on page 107

Manage Your Workload

You can manage your workload by either:

- Assigning yourself the offsite selected residents in your assigned area of the facility, then adding other residents who should be in the initial pool as determined through screening.

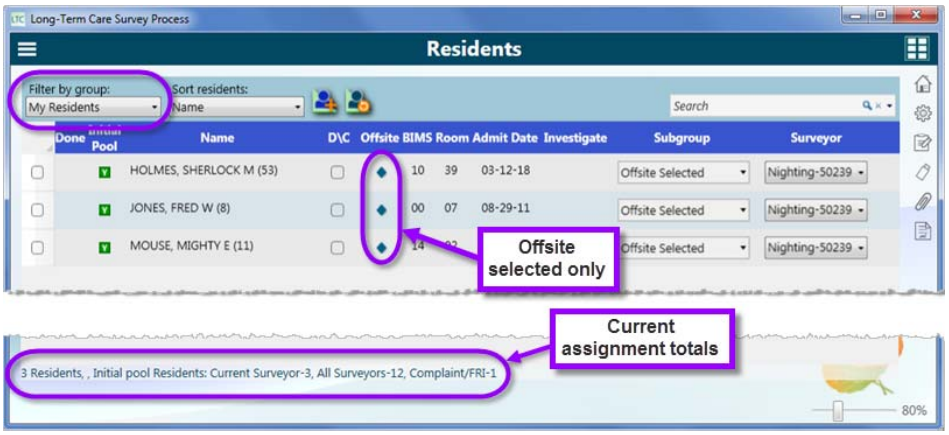


Figure 56: Manage workload by only assigning offsite residents

-or-

- Assigning yourself all residents in your assigned area of the facility, then unassigning residents who should *not* be in the initial pool as determined through screening.

Figure 57: Manage workload by only assigning all residents

More ...

"Assign Surveyor to Resident" on page 71
"Unassign Surveyor" on page 74

Interview, Observations, and Record Review for Initial Pool Residents

After identifying residents for the initial pool, you are ready to interview, observe, and perform a limited record review for those residents. You may find issues related to care areas that will be investigated later in the LTCSP process.

For the residents in your initial pool, the Interview and Observations screen is used to:

- Conduct resident interviews (RI)
- Conduct resident representative interviews for non-interviewable residents (RRI)
- Make observations of residents (RO)
- Perform a limited record review of residents (RR)

During the initial pool process you will:

- Conduct the Interview, Observations, and Record Reviews for all care areas (CAs) and indicate the areas where you determine a need for further investigation (FI) (it is best practice to respond to all areas to know they have been addressed)
- Indicate if there are any MDS discrepancies
- Indicate if any issues found are at the Harm or IJ level

More ...

"Interview and Observations Tips" on page 200

Open Interview and Observations

Access the Interview and Observations (RI) screen from the Resident Manager in either List or Card view.

To open the Interview and Observations screen:

1. In **List** or **Card** view, locate the resident.
2. In **List** view, double-click the resident's name.

   -or-

   In **Card** view, click the **RI** icon on the resident's card.

The Interview and Observations screen opens. The layout is the same, whether opened from List or Card view.

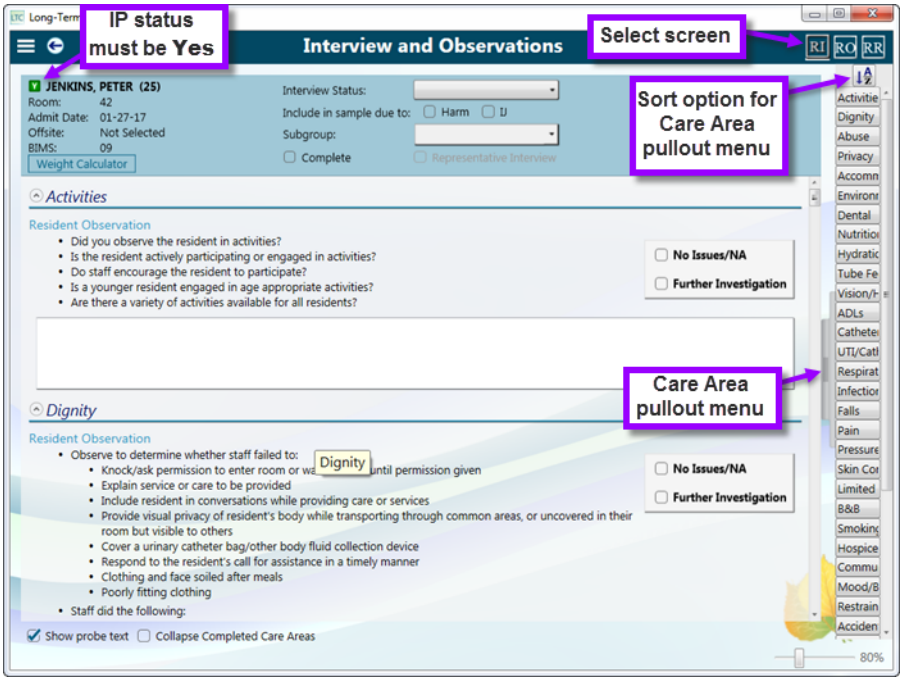


Figure 58: Interview and Observations screen

The interview CAs are organized first by quality of life and resident rights, followed by quality of care. Resident information displays on the upper left, process information in the middle, and MDS indicators on the right. A weight calculator is available to determine weight gain/loss.

Note: Interview and Observations appear together on this screen since surveyors often conduct an observation while interviewing a resident. The Observations (RO) screen shows only observation CAs.

More ...

"Interview and Observations Tips" on page 200

Care Areas

The screen lists all care areas (aka initial pool or interview areas) specific to the screen (Interview and Observations, Observations, or Record Review).

TIP: To jump to a specific care area (CA), click the tab on the right of the screen to open the **Care Area** pullout menu and select the desired CA.

When conducting a resident interview, you must cover every care area (initial pool/interview area), whether or not the area is an MDS indicator for a resident. You will ask questions guided by the probes provided in the application, or your

own questions, as long as you adequately address the area with the resident. You will then select the appropriate response option:

- No Issues/NA

  Select if you have determined that there are either no issues (NI) for the CA or the CA does not apply to the resident (e.g., catheter questions only apply to residents needing a catheter).

  Dialysis, smoking, hospice, and ventilator CAs have a separate NA option.

- Further Investigation

  Select if something heard or observed requires further investigation (FI). You should document the concern in the Notes field for the CA.

When you select a response, the CA is marked with a green checkmark (no concern) or an orange exclamation point (further investigation required) to indicate completion, both on the screen and pullout menu.

It is best practice to respond to all areas to know they have been addressed. You may only mark those CAs that require further investigation with two exceptions (see below). However, you must check the **Complete** option in the Function toolbar for the system to recognize that you have completed the resident Interview, Observations, and Record Review (you must mark all three screens).

You ***do not have to*** mark No Issues/NA with **two exceptions**:

1. For the required areas of hospice, dialysis, ventilator, smoking, transmission-based precaution, you must mark No Issues if the area applies to the resident and there are no concerns to ensure at least one resident is sampled for the area, and
2. For the medication-related record review areas of insulin, antipsychotic, anticoagulant, high risk medications, diagnoses, and hospice, you must document whether the resident is currently receiving the medication or has one of the conditions listed to ensure the Unnecessary Medication selection is based on accurate and current information.

Note: On the combined Interview and Observation screen, the completion indicator (checkmark or orange exclamation) shows only when NI or FI is marked for the Resident Interview portion of the care area. If you only mark NI or FI for the Resident Observation portion, no completion indicator shows for the Interview and Observation care area or on the pullout menu. The completion indicator does show on the Observation screen and pullout menu for that care area. If the RO portion is marked FI, and the RI portion is marked NI, the orange exclamation shows on both screens.

However, if the care area is a Resident Observation only (no interview portion), the completion indicator shows for the care area on both the Interview and Observation and the Observation screens.

When all CAs for the interview, observation, and record review are complete (i.e., marked either NI or FI), a green checkmark appears over the corresponding icon.

- In Card view, a green checkmark appears on the RI/RO/RR icon to indicate completion, and an orange exclamation point appears next to the resident's name if at least one CA was marked FI.
- In List view, a green checkmark appears next to the resident's name when all three screens (RI, RO, RR) are complete, and a blue circle in the Investigate column indicates at least one CA is marked for Further Investigation.

TIP: To free up screen space as you go along, select **Collapse Completed Care Areas** at the bottom of the screen (RI, RO, RR).

Navigate Care Areas

You should conduct the interview in the order that the care areas appear on the screen—starting with quality of life questions and moving on to quality of care questions. If, however, you do need to go to a specific care area use the Care Area pullout menu. You can also alphabetize the list of care areas on the menu to make it easier to find a specific care area.

To use the Care Area pullout menu:

➥ Click the tab to open the **Care Area** pullout menu. Initially the view is the same order as the care areas appear on the screen (quality of life to quality of care).

- Click a care area name to jump to that care area on the screen.

TIP: The menu uses abbreviations for the care area names, hover over a menu name to see the full care area name.

➥ Click the **Alphabetize Care Area** button to sort the care areas listed on the menu alphabetically.

- Click the **Alphabetize Care Area** button again to return the sort order to the default.

Note: Whichever sort order you set the Care Area menu to remains the sort order in LTCSP until you change the order again.

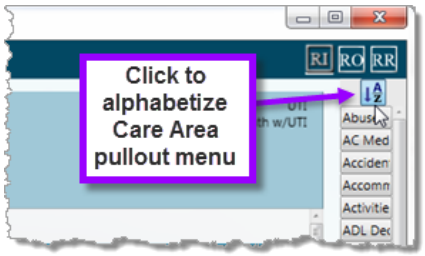


Figure 59: Care Area pullout menu Alphabetize Care Area menu button

Adding Care Areas on the Record Review screen

If you find issues during limited record reviews that are not covered by the system-selected care areas, you can add any other care area to the Record Review screen. Rather than selecting the Other Concerns care area, you can select a more specific care area that will then trigger the appropriate investigation.

To add a care area to the Record Review screen:

1. On the **Record Review** screen, click to open the **Additional Care Areas** list.
2. Select one or more care areas you would like to add; click out of the drop-down list or press **Escape** to close.

   The added care areas appear on the screen and in the pullout menu.

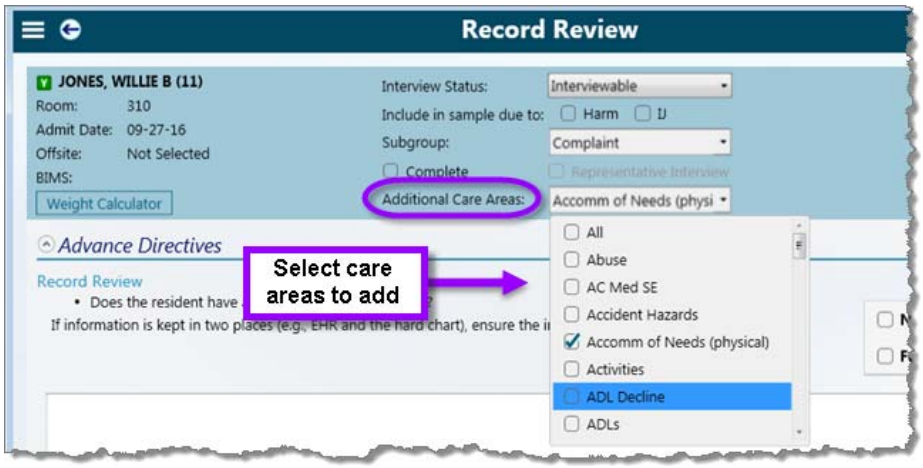


Figure 60: Select an additional care area

TIP: You can remove a care area that you added as long as you remove your answers (NI or FI) from the care area. Remove the selection from the Additional Care Areas list and the CA will be removed.

More ...

"Interview and Observations Tips" on page 200
"LTCSP Notes" on page 24

Probe Text

LTCSP provides a list of questions specifically tailored for each care area. These questions are called probe text. They serve as suggestions or guidance that surveyors can reference for assistance when conducting interviews, observations, and record review.

TIP: Select/deselect **Show probe text** at the bottom of the screen (RI) to show/hide suggested questions.

More ...

"Interview and Observations Tips" on page 200

Assign Interview Status and Subgroup to Resident

After selecting residents to include in the initial pool, you determine and set the interview status and subgroup for each resident on the Interview and Observations screen.

Resident Interview (RI) or Observation (RO) may or may not be applicable and required depending on the assigned interview status. If RI or RO is not required, a green checkmark is placed on the corresponding icon (indicating completion) as soon as a triggering interview status is selected. For example, neither interview or observation is possible or required if a resident is out of the facility, so both RI and RO are marked as complete.

Record Review (RR) is required for all initial pool residents regardless of interview status. Different CAs will be listed on the RR screen depending on interview status and subgroup. For example, additional areas are listed for new admissions.

To set resident interview status and subgroup:

1. Open the **Interview and Observations** screen. Verify that the IP status is Yes. If not, set to Yes to continue.
2. In the resident information section at the top of the screen, select the appropriate **Interview Status** and **Subgroup** for the resident.

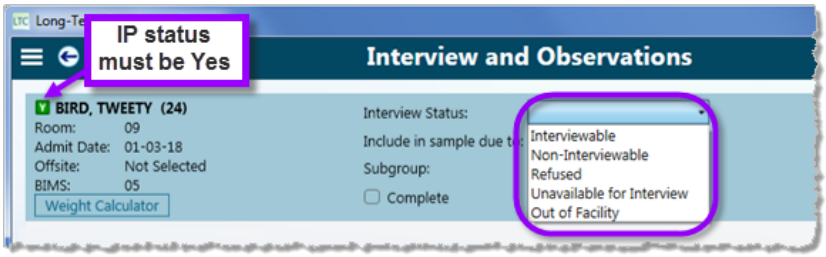


Figure 61: Interview Status options

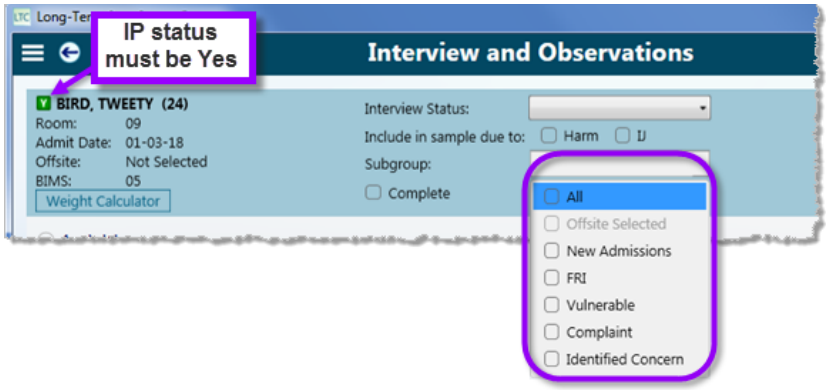


Figure 62: Subgroup options

More ...

"Open Interview and Observations" on page 76
"Interview Status" on page 199

Conduct Resident Interview (RI)

The resident interview screen (Interview and Observations) includes the Resident Observation section since it is often possible to conduct an observation while interviewing a resident. Care areas for both the resident interview and observation are listed.

Offsite selected residents should always be interviewed unless they are Out of Facility, refused, unavailable for interview, or non-interviewable. If they cannot be interviewed, a limited record review must be completed. If the offsite resident is discharged from the facility, they are listed in the closed record sample as a closed record candidate.

To record results of a resident interview/observation:

1. Open the **Interview and Observations** screen. Verify that the IP status is Yes. If not, set to Yes to continue.
2. For **Interview Status**, select **Interviewable**.
3. Based on the interview/observation, select **No Issues/NA** or **Further Investigation** for all CAs and enter notes as appropriate.

   When you select an option, the CA is marked with a green checkmark (no concern) or an orange exclamation point (further investigation required), both on the screen and pullout menu.

   Some CAs are observation-only. When you complete an observation-only CA on the Interview and Observations screen, the green checkmark appears even if you mark Further Investigation for the observation. The orange exclamation appears only on the Observations screen.

   When all Resident Interview CAs are complete for a resident, a green checkmark appears over the RI icon to indicate the interview process is complete.

More ...

"Open Interview and Observations" on page 76
"Interview and Observations Tips" on page 200
"LTCSP Notes" on page 24

Conduct Resident Representative Interview (RRI)

Not every resident is capable of being interviewed. The survey team should try to conduct three resident representative interviews for non-interviewable residents per survey. If a representative is not available, the surveyor still conducts the observations and limited record review for the resident.

To record results of a resident representative interview:

1. Open the **Interview and Observations** screen. Verify that the IP status is Yes. If not, click the IP status icon and set to Yes to continue.
2. For **Interview Status**, select **Non-Interviewable**.
3. Select the **Representative Interview** checkbox. An RRI Contact Information field appears. Enter representative contact information for easy reference.

   The RRI option is enabled only when Interview Status is Non-Interviewable. When selected, the probes change and some additional probes specific to the representative interview are available.
4. Based on the interview, select **No Issues/NA** or **Further Investigation** and enter any notes for all care areas.

   When you select an option, the CA is marked with a green checkmark (no concern) or an orange exclamation point (further investigation required), both on the screen and pullout menu.

Some CAs are observation-only. When you complete an observation-only CA on the Interview and Observations screen, the green checkmark appears even if you mark Further Investigation for the observation. The orange exclamation appears only on the Observations screen.

When all Resident Representative Interview CAs are complete for a resident, a green checkmark appears over the RI icon to indicate the interview process is complete.

Add an RRI after sample finalization

Before sample finalization you may not have an opportunity to conduct a resident representative interview. If an RRI/family interview is completed during the investigative process, complete the RRI interview on the Resident Manager screen.

If the resident was already included in the initial pool, go to the RI screen to complete the RRI interview. If the resident was not part of the IP, you can add them to the initial pool and conduct interview.

To conduct a resident representative interview after sample finalization:

1. Open the **Interview and Observations** screen for the resident.
2. Click the **Add to Initial Pool for Representative Interview** button.

Figure 63: Add to Initial Pool for Representative Interview button

3. Click **Yes** in the **Confirm Status Change** dialog to add the resident to the initial pool. The system automatically:
   - Changes the IP status to **Yes**
   - Changes the **Interview Status** to **Non-Interviewable**
   - Selects **Representative Interview** and activates **RRI Contact** field
   - Activates questions for the representative interview

- Adds resident to the Finalize Sample screen, even though the sample has been finalized
- Adds resident to all Initial Pool reports

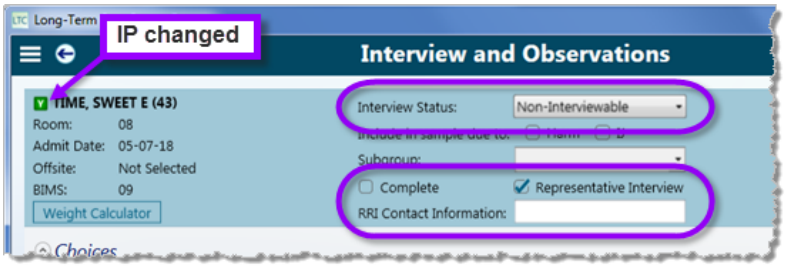


Figure 64: Screen updated after adding a representative interview

4 Conduct the interview.

If you determine that a CA needs further investigation, you will need to initiate the investigation on the Investigations screen or add the resident to the appropriate facility task.

More ...

"Open Interview and Observations" on page 76
"LTCSP Notes" on page 24

Conduct Resident Observation (RO)

The resident interview screen (Interview and Observations) includes the Resident Observation section since it is often possible to conduct an observation while interviewing a resident. If you complete observation-only care areas on the Interview and Observations screen, the Complete and Further Investigation indicators appear only on the Observations screen. You can, of course, complete observation-only CAs directly on the Observations screen, the likely option for residents you observe but do not interview.

To record resident observation results:

1 Open the **Interview and Observations** screen. Verify that the IP status is Yes. If not, set to Yes to continue.

2 Select the **RO** icon to open the **Observations** screen.

3 Based on your observations, select **No Issues/NA** or **Further Investigation** and enter any notes for all CAs.

When you select a result, the CA is marked with a green checkmark or an orange exclamation point to indicate completion, both on the screen and pullout menu.

When all Resident Observation CAs are complete, a green checkmark appears over the RO icon.

More ...

"Open Interview and Observations" on page 76
"Interview and Observations Tips" on page 200
"LTCSP Notes" on page 24

Conduct a Limited Record Review (RR)

The system selects certain care areas for the limited record review based on assigned MDS indicators for each resident.

A limited record review must be conducted for all initial pool residents including those who refuse, are non-interviewable, or are out of the facility. Different CAs appear for each resident based on MDS data, interview status, and subgroup.

Since no MDS data exists for new admissions, the limited record review lists all available CAs. The record review is used to identify MDS indicators, for example:

- Hospice
- High risk medications
- Diagnoses

You can add additional care areas to the Record Review, if necessary (see "Adding Care Areas on the Record Review screen").

Complete a limited record review:

1. Open the **Interview and Observations** screen. Verify that the IP status is Yes. If not, set to Yes to continue.
2. Click the **RR** icon to open the **Record Review** screen.
3. Based on the record review, select **No Issues/NA** or **Further Investigation** and enter any notes for all CAs.

   When you select a result, the CA is marked with a green checkmark or an orange exclamation point to indicate completion, both on the screen and Care Area pullout menu.

   When all Record Review CAs are complete, a green checkmark appears over the RR icon.

More ...

"Open Interview and Observations" on page 76
"Adding Care Areas on the Record Review screen" on page 80
"Interview and Observations Tips" on page 200
"LTCSP Notes" on page 24

Determine Weight Loss/Gain

The weight calculator, available in the RI, RO, RR as well as the Nutrition investigation screens, provides a way to calculate weight loss/gain for a resident. Once calculated, you can paste a statement into a notes field with the weights, the date each weight was taken and the percent difference in weight measurements. Once you enter both dates, the system will determine the gain or loss based on the earliest date entered whether it is first or second.

The system keeps the data in the weight calculator only for that resident—once you switch to a different screen (e.g., the Resident Manager card or list view) the data no longer appears in the weight calculator.

To calculate weight loss/gain for a resident:

1. Click the **Weight Calculator** button.
2. Enter the first weight and associated date.
3. Enter the second weight and associated date.

To paste the weight loss/gain statement into a notes field:

1. Click the **X** to close the calculator.
2. Click in the notes field where you want the statement.
3. Click the **Paste Weight Calculation icon**, or press **Alt** + **W**.

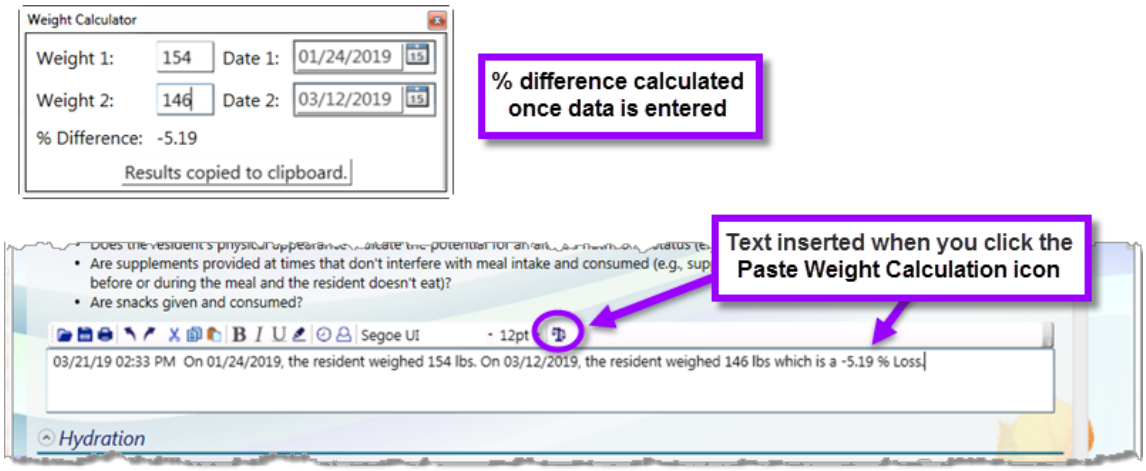


Figure 65: Weight calculator (top) and example of message inserted

Mark an MDS Discrepancy

If you discover an MDS discrepancy during interview/observation/record review, mark it for the care area. For example, if Cath (Catheter) is included in a resident's MDS indicator list, but you discover during the interview that the resident never had a catheter, you need to mark this as an MDS discrepancy. The Resident Assessment facility task is triggered when an MDS discrepancy is identified.

To mark an MDS discrepancy:

1. On the applicable screen (RI, RO, or RR), click the tab on the right to open the **Care Area** pullout menu, if desired.
2. Select the applicable care area.
3. Click the **MDS Discrepancy** checkbox.

   This checkbox is available only for CAs that are mapped to an MDS indicator.

More ...

"Interview and Observations Tips" on page 200

Mark a Significant Concern

If issues are found indicating a potential Harm or IJ (Immediate Jeopardy) situation, you can indicate this. The resident is automatically flagged for further investigation and included in the current sample.

To mark a significant concern:

➥ On an RI, RO, or RR screen, select a reason for **Include in sample due to:** Harm or IJ.

In Card view, an orange exclamation point appears next to the resident's name. In List view, there is a blue circle in the Investigate column for the resident.

Note: The **Include in Sample due to** reason also appears in the **Sample Reason** column on the Finalize Sample screen.

Transfer Resident Data

Surveyors on occasion may accidentally record interview/observations/record review data under the wrong resident name.

All care area answers and notes transfer from the original (wrong) resident to the receiving (correct) resident. If a subgroup was assigned to the resident, you will have to manually update that for the correct resident. You can transfer answers for all screens or any combination of the resident interview, resident observation, or record review screens, including resident representative interview.

The notes transfer for care areas and appear on all screens—for example, if you transfer only the Resident Interview screen, the care area notes for those care areas that appear on the Observations or Record Review screens appear for all screens as they normally do when you enter notes for a care area that appears on more than one screen.

LTCSP provides an interview transfer option to move all the data to the correct resident ***if*** that resident

- has an IP indicator set to Yes
- is not assigned to a different surveyor
- has no data entered on any screen

If you are transferring only one (or two) screens, you can transfer data to the correct resident's screen, ***if*** that resident

- has an IP indicator set to Yes
- is not assigned to a different surveyor
- has no responses entered on the screen being transferred
- has no MDS Discrepancies selected on any screen
- has no care area notes in shared care area notes fields (see table below)

For the screens that you are not transferring you can have care area notes for care areas specific to that screen and not a shared care area—you still must not have any care area notes in the other care areas on any screen for the transfer to work. The following table lists the care areas where you can have data if not transferring to that screen

OK to have a note in care area…	If NOT transferring data to this screen
Notification of Change	RRI
Language/Communication	RO
Mood/Behavior	RO
Restraints	RO
Accident Hazards	RO
Call Light in Reach, Call system Functioning	RO
Edema	RO
Psych Med Side Effects	RO
Psych/Opioid Med Side Effects	RO
AC Med Side Effects	RO
Oxygen	RO
Positioning	RO
Ventilator/Tracheostomy	RO

OK to have a note in care area...	If NOT transferring data to this screen
Change of Condition	RR
Antipsychotic with Alzheimer's or Dementia	RR
PASSAR	RR
High Risk Meds	RR
Advance Directives	RR
Diagnoses	RR
Insulin	RR
AC	RR

To transfer interview data to another resident:

1. Open the **Resident Manager**.
2. Verify that the receiving resident has no information entered and the IP status is set to Yes.
3. In **Card** or **List** view, locate the resident with the data you want to transfer.
4. In **Card** view, click the resident's name.

   -or-

   In **List** view, select the box next to the resident's name and click the **Update Resident** icon.
5. In the **Add/Update Resident** dialog, click the **Transfer RI/RRI, RO, or RR Info to Another Resident** button at the bottom.
6. In the **To** list, select the receiving resident.
7. In the **Types** list, select **All** or **RI**, **RO**, **RR**, or any combination of these to transfer.

Note: If you only transfer resident interview/resident representative interview answers and not the resident observation answers, the completed indicators appear on the RI/RRI screen for the correct resident only, even if the care area included the answer for the observation section.

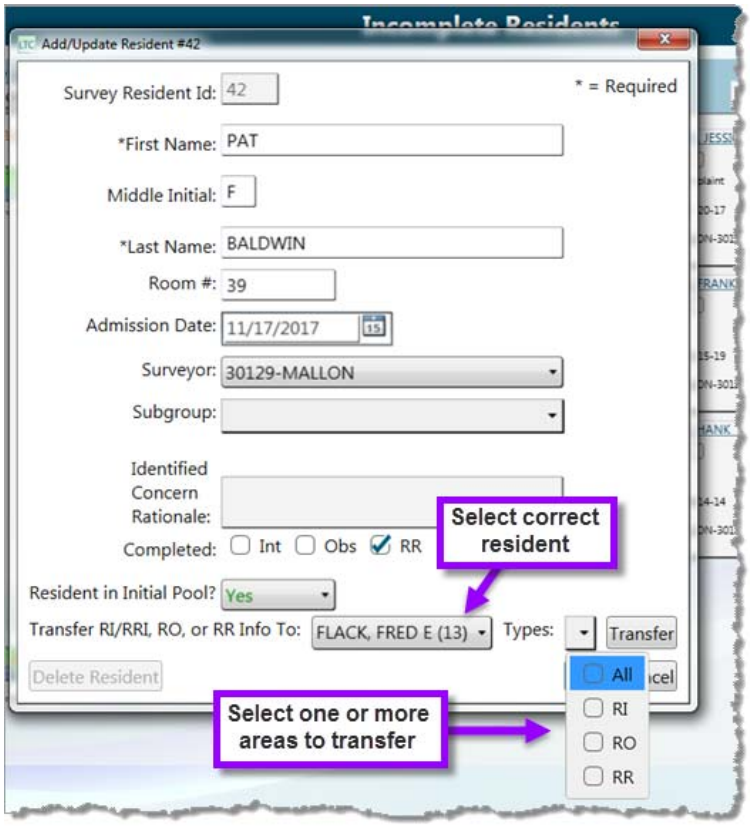


Figure 66: Select resident and info to transfer

8 Click the **Transfer** button.

TIP: When you set the IP Status to Yes, the system automatically assigns you as surveyor, but you can change the surveyor assignment in the Add/Update Resident dialog.

9 Click **OK**, then **Save**.

10 Verify that the information transferred correctly. Select an Interview Status to complete any remaining care areas on any screen.

Completion checkmarks or Further Investigation exclamations and all notes transfer along with the answers. Notes for RI/RRI and RO combined care areas appear for both residents if you only transfer one of the screens (e.g., transfer answers for RI, not RO, that include notes for the Nutrition CA, notes stay in the original resident's notes field as well as appear in the receiving resident's notes).

TIP: If you used the resident unique ID in any of your notes, this number does not change, so you will need to update your notes to the ID of the resident you transferred the answers to.

More ...

"Open the Resident Manager" on page 58

Completed Screens

As you choose NI or FI for a care area, the system marks these CAs complete. When all CAs for a screen (Interview and Observations, Observations, or Record Review) are completed, the system automatically marks the screen as complete with a green checkmark over the RI, RO, or RR icon in the upper right part of the screen or on the Resident card.

When you have completed all three screens for a resident, the system marks the resident as complete. In **List** view a green checkmark displays beside the resident name. In **Card** view, the resident's card is automatically moved to the **Complete** folder.

You always want to complete a full interview with a resident, but if for some reason you cannot complete an interview/observation/record review for a resident, you can manually mark any or all of them as complete. You might use this option, for example, to manually mark RI as complete for a resident you cannot complete an interview with.

To manually mark a screen as complete:

1. Go to the applicable screen: RI, RO, or RR.
2. Select the **Complete** checkbox (at the top in the Function toolbar).

   A green checkmark is placed on the applicable icon.

To view residents marked as complete:

➥ In the **List** view, look for the green checkmark to the left of a resident's name.

➥ In the **Card** view, click the **Complete** folder.

Finalize Sample

The sample selection process occurs after the initial pool process is completed and data is shared with all team members. During the sample selection process, the TC will:

- Update the facility census number if necessary.
- Determine the number of residents required to complete the sample.

- Decide if any offsite selected residents should be replaced in the sample.
- Record the selected sample residents in the LTCSP application, and verify any areas of concern.

All the data gathered from the initial pool process (interviews, observations, and record review) is available and provides the survey team with information to help choose residents to include in the sample for investigation.

TIP: If you start sample finalization on the Finalize Sample screen too soon, press **Alt** + **U** to reactivate the Start Sample Finalization button. This only works for Start Sample Finalization; once the sample is finalized, it cannot be reset.

Residents are selected for investigation, either by the system or the survey team, through:

- Sample finalization
- Closed record review

  There is a separate process for selecting residents with closed records for the sample.

More ...

"Closed Record Review Sample" on page 107
"Reset Sample Finalization" on page 101

Open the Finalize Sample screen

There are two different views of the Finalize Sample screen, by Resident and by Care Area. Surveyors can choose the view they prefer and switch between views.

Note: Do not start sample finalization until data has been shared with all team members.

Only the team coordinator can actually select the sample. All surveyors have read-only access to the information to help with the team discussion and decision making. Both views are read-only until the finalize sample process is initialized.

To open the Finalize Sample screen:

1 From the **Navigation** menu, select **Finalize Sample**.

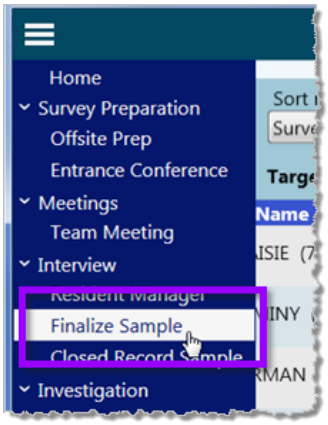


Figure 67: Finalize Sample option

Resident view appears by default.

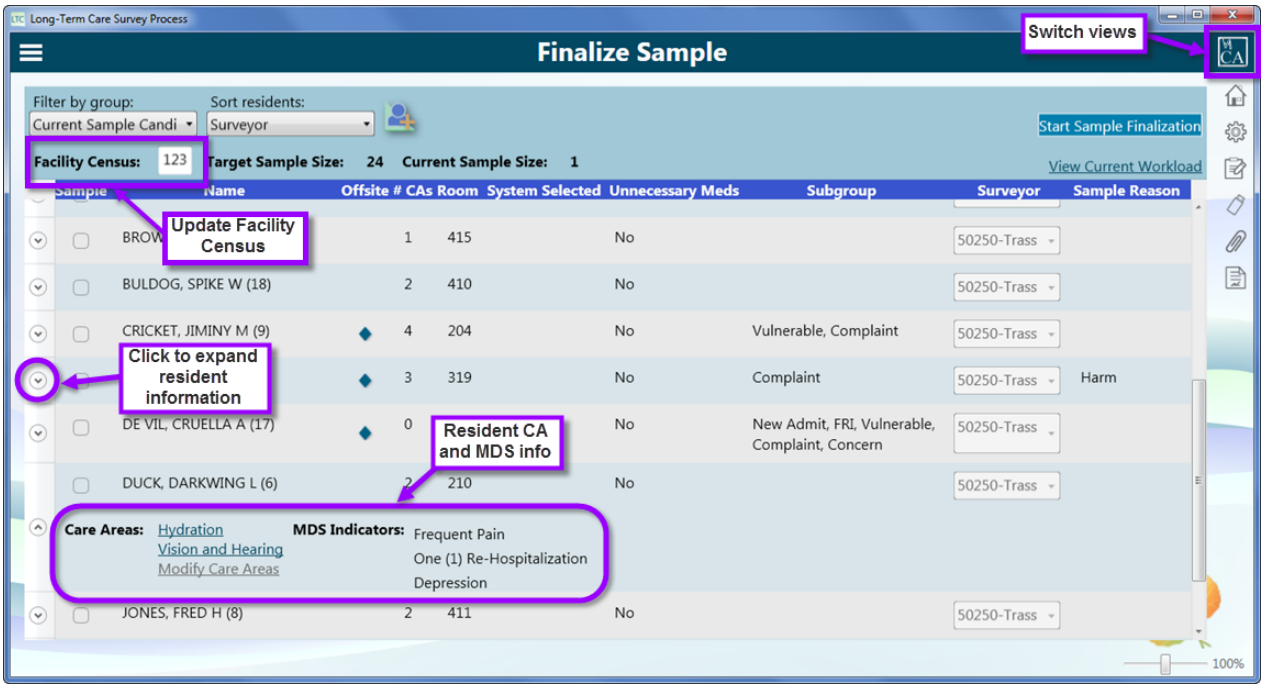


Figure 68: Finalize Sample screen–default Resident view

2 To switch between views, click the **by Resident** or **by Care Area** icon in the upper right corner of the screen.

3 To display care areas and MDS information in either Resident or Care Area view, click the arrow to the left of the resident's name to expand/collapse the resident record.

Care areas and MDS information can be viewed at any time, but CAs cannot be modified until you initiate sample finalization.

4 In either view, click a CA for a resident to display any notes that were recorded during the interview and observation of initial pool residents.

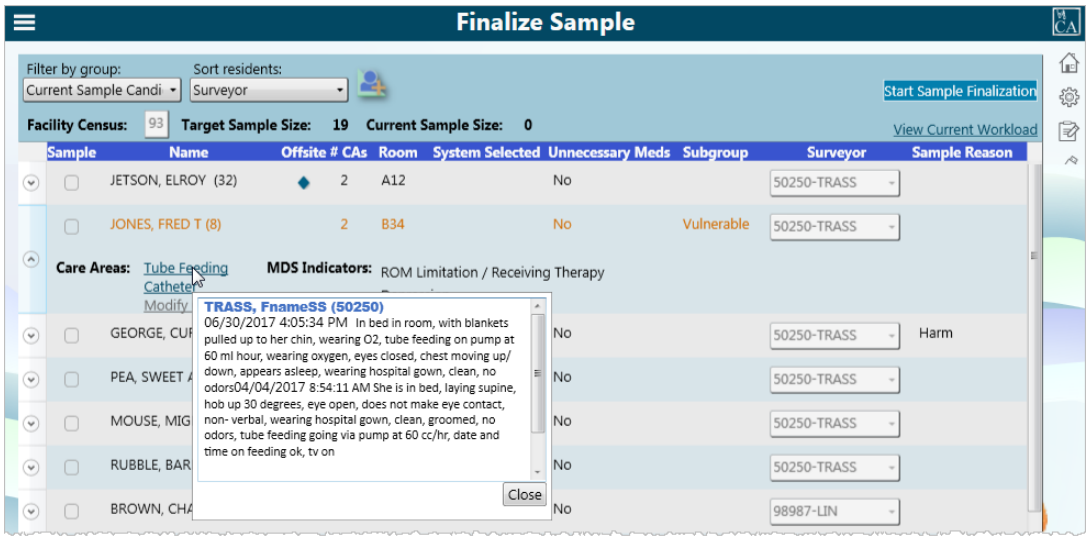


Figure 69: Finalize Sample–Care Area notes

More ...

"Sample Finalization Tips" on page 201

Finalize Sample by Resident view

By default, current sample residents are listed according to the value in the **Sort residents** field. The Finalize Sample by Resident view displays basic resident information, the number of care areas marked as Further Investigate for each resident, and also provides the ability to select which residents to include in the sample.

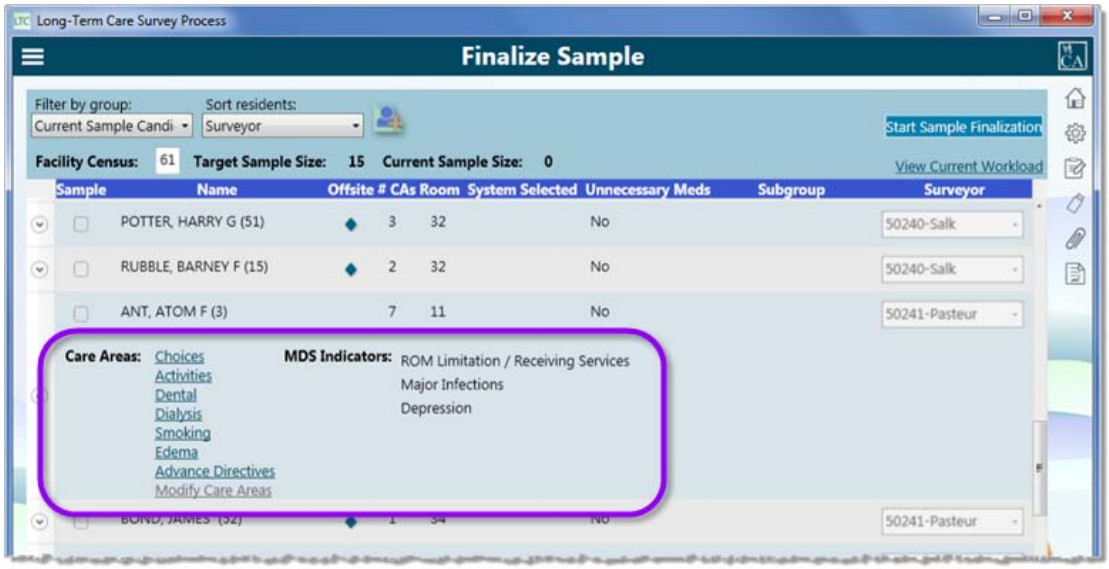


Figure 70: Finalize Sample with resident expanded to show care areas and MDS indicators

More ...

"Sample Finalization Tips" on page 201

Finalize Sample by Care Area view

Care areas are listed by default in descending order according to the number of residents marked for Further Investigation for each area. **In Sample** shows how many of these residents are included in the sample. Care Area view may help in ensuring care area representation in the sample.

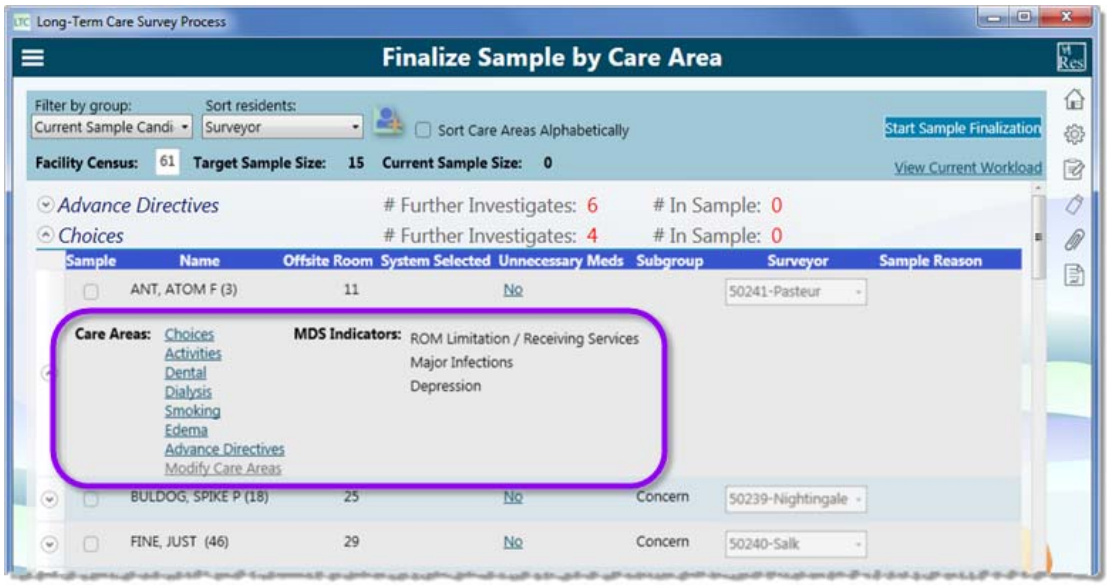


Figure 71: Finalize Sample by Care Area with resident expanded

More ...

"Sample Finalization Tips" on page 201

Finalize Sample Filter and Sort

Filter and sort functions are available in both Resident and Care Area views.

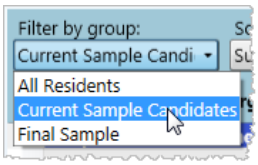


Figure 72: Finalize Sample–Filter by group options

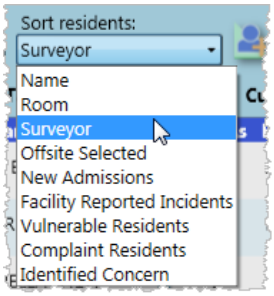


Figure 73: Finalize Sample–Sort residents options

In Care Area view, you can also sort CAs alphabetically.

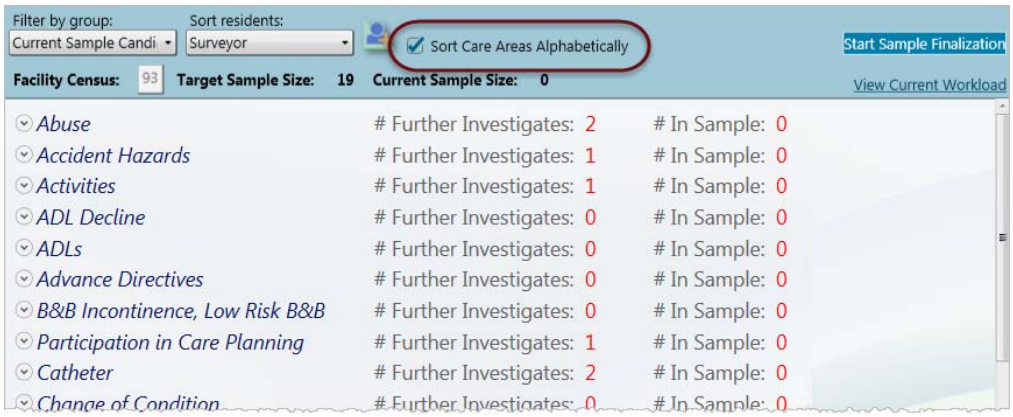


Figure 74: Finalize Sample by Care Area sorted alphabetically

More ...

"Sample Finalization Tips" on page 201

For more information about the sample selection process, refer to Step 17 in the *Long Term Care Survey Process (LTCSP) Procedure Guide* (In LTCSP: Navigation menu | Resources | Procedures Guide).

Adjust Facility Census

The facility census number determines the target sample size. When you are out in the field, you may discover that the census number is different than that reported in MDS which may affect your target sample size.

If the census number is changed, the system automatically adjusts the **Target Sample Size**. **Target Sample Size** is the minimum number of residents for the sample. **Current Sample Size** indicates the number of residents currently included in the sample. The **Current Sample Size** shows "0" until you click the Start Sample Finalization button.

Note: The sample size can exceed the target sample number.

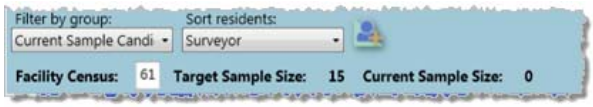


Figure 75: Finalize Sample–census and sample size

To update the facility census:

1. Open the **Finalize Sample** screen.
2. Enter the new number in **Facility Census**.
3. Press **Tab** (this moves the focus to the Start Sample Finalization button, don't press Enter or you'll start the finalization) or click out of the box to update.

   The **Facility Census** and **Target Sample Size** update on the screen.

Note: Any team member can update the sample even though only the TC can finalize the sample.

Start Sample Finalization

The team coordinator initiates the sample finalization process during which the survey team determines which residents to include in the sample for investigation. Keep the following guidelines in mind when selecting the sample:

- Verify that all care areas marked for further investigation for any resident are represented in the sample.
- Include residents marked for Harm or Immediate Jeopardy (IJ).
- Include the complaints and Facility Reported Incidents (FRI) from the initial pool (maximum of five per team). Any other complaints/FRIs (above the five in the initial pool) that were brought onsite for investigation must be in addition to the sample, i.e., "additional complaints/FRIs" per Step 17 in the *Long Term Care Survey Process (LTCSP) Procedure Guide*.
- Include residents with an abuse concern or if there is a history of abuse at the facility.
- Include hospice, dialysis, ventilator residents, and transmission-based precautions, even if none are marked for further investigation.

When sample finalization is initiated, the following actions are triggered:

- A snapshot of resident information is created.

- Residents are system-selected for the sample if they are:
  - Offsite selected with at least one care area marked Further Investigation
  - Added by surveyor and marked for IJ or Harm
  - Marked further investigation for the Abuse care area
- Five residents, if possible, are system-selected for an unnecessary medication review. These residents may not have been a part of the initial pool and may not be in the sample.

Note: The unnecessary medication review residents appear on the Investigations screen and the review is to be completed even if they were not selected to be included in the sample.

More ...

For detailed information about the sample selection process, refer to Step 17 in the *Long Term Care Survey Process (LTCSP) Procedure Guide* (In LTCSP: Navigation menu | Resources | Procedures Guide)

To start sample finalization:

1. From the **Navigation** menu, select **Finalize Sample**.
2. Select the **Start Sample Finalization** button in the upper right.

   The button appears only if you are the team coordinator.

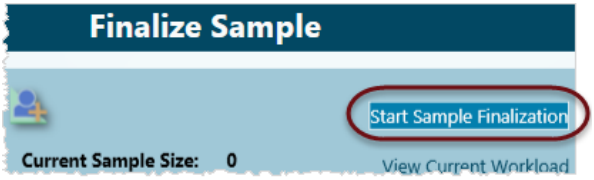


Figure 76: Finalize Sample-begin sample finalization

TIP: If you start sample finalization on the Finalize Sample screen too soon, press **Alt** + **U** to reactivate the Start Sample Finalization button. This only works for Start Sample Finalization; once the sample is finalized, it cannot be reset.

3. Select **OK** on the popup listing the residents selected for Unnecessary Meds.
4. Review the sample.

   Note that:

   - Current Sample Size has been updated

- Start Sample Finalization button title has changed to Finalize Sample
- System Selected and Unnecessary Meds columns are populated/updated

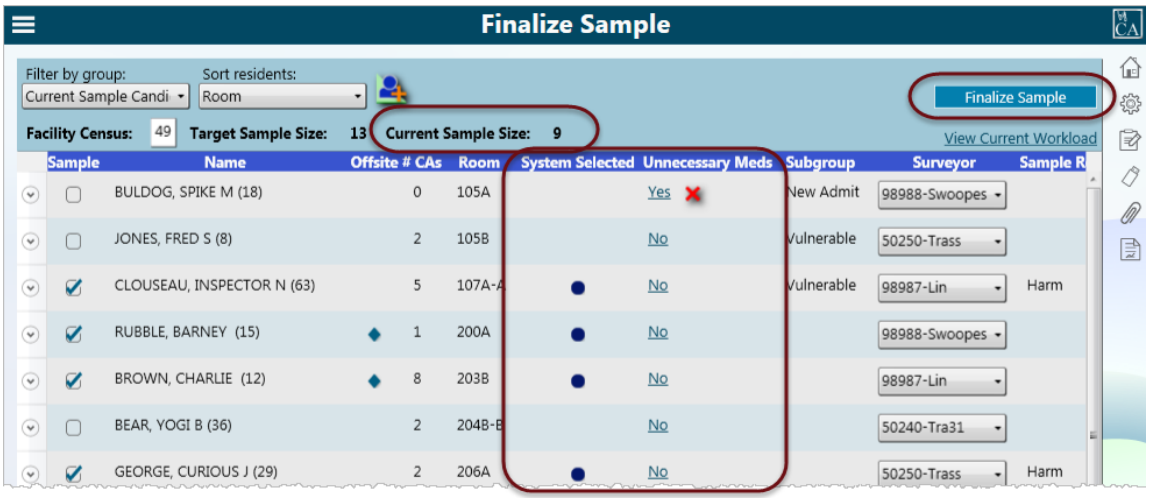


Figure 77: Finalize Sample screen - sample finalization initiated

5 Make changes as necessary. Only the TC can update information.

Reset Sample Finalization

It is important to wait until all interviews, observations, and record reviews have been completed by the team and all data has been transferred to the team coordinator. This ensures that all the information is available to make sample decisions, including any unnecessary meds candidates determined from the limited record review.

If, however, you start the sample finalization process on the Finalize Sample screen prematurely, you can reset the sample data.

To reset sample finalization:

➥ Press **Alt** + **U** to return the data to the state it was before beginning sample finalization. This function:

- Toggles button from Finalize Sample back to Start Sample Finalization.
- Resets sample selections—any selections you made will not be retained.
- Recalculates the unnecessary meds residents when you start sample finalization again ensuring that any unnecessary meds candidates determined through the limited record review will be included.

This function ONLY works to reset the begin sample finalization; once finalized, the sample cannot be reset and finalized again.

More ...

"Sample Finalization Tips" on page 201

Modify Resident Care Areas

The team coordinator can add or remove care areas for residents as appropriate. For example, if you discover a resident is susceptible to falls and the Falls care area is not marked for Further Investigation, you might want to add the Falls CA for that resident.

Note: If a care area marked for Further Investigation triggers a facility task, that CA is not listed in the Finalize Sample screen. For example, any concerns with sufficient staffing will not be displayed on this screen since those concerns will trigger the Sufficient Staffing facility task.

To modify care areas for a resident:

1. From the **Navigation** menu, select **Finalize Sample**.
2. In **Resident** view, expand the resident's record and select **Modify Care Areas**.

   -or-

   In **Care Area** view, expand the care area, expand the resident's record, and select **Modify Care Areas**.

   The Add/Update Care Area window displays a check list of CAs for the selected resident.
3. Select the checkbox for a CA to add it, clear the checkbox to remove it, click **Save** to close the window.

Add Residents to Sample

The team coordinator may need to add residents to the sample:

- To reach the Target Sample Size
- To add any residents who should be included even if the sample size has already met the target
- To replace system/offsite-selected residents with more appropriate candidates

When adding residents to the sample, consider the following criteria:

- Residents with the most concerns
- Residents with concerns related to quality of life and resident rights
- Residents with medication related concerns
- Residents in any unrepresented areas of the buildings
- Prior survey and/or complaint results

To add a resident to the sample from Resident view:

1. Open **Finalize Sample** in **Resident view**.
2. Click the down arrow to the left of a resident's name to review information.
3. To add the resident to the sample, click the **Sample** checkbox next to the resident's name.

   The Current Sample Size number is increased by 1.

To add a resident to the sample from Care Area view:

1. Open **Finalize Sample** in **Care Area view**.
2. Look at the list of care areas.

   You may find a CA not represented in the sample that should be. For example, if a CA has a number > 0 for Further Investigates (FI) but 0 in the sample, you will add a resident from that CA to the sample.
3. Click the arrow next to the CA name to show the list of residents marked for FI.
4. Click the **Sample** checkbox next to the resident's name to add the resident to the sample.

   The Current Sample Size number is increased by 1.

Remove Residents from Sample

The team coordinator may want to remove a system-selected resident from the sample. For example, another resident with more concerns may be a more appropriate candidate for the sample. A reason is required to remove a system-selected resident.

To remove a resident from the sample:

1. Open **Finalize Sample**, either view.
2. Clear the **Sample** checkbox (remove the checkmark) for the sample candidate you want to remove.

3 For a system-selected candidate, select a **Reason** and enter a **Description** of the reason.

A description is required only if Other is selected as the reason.

The Current Sample Size number decreases by 1.

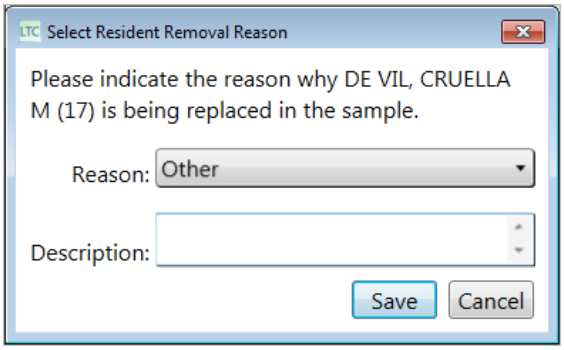


Figure 78: Remove a system-selected resident from sample

Complete Sample Finalization

The sample identifies residents that will be included in the investigation process. When the team decides which residents to include in the sample, the team coordinator finalizes the sample.

Sample finalization cannot be undone. However, you can add or remove residents during investigations, so the team retains the flexibility to guarantee the most appropriate residents are included.

To finalize the sample:

1 Open **Finalize Sample**, either view.

2 Set **Filter by group** to **Final Sample**.

3 Before finalizing the sample, review the candidates and compare them to the process recommendations.

4 Click the **Finalize Sample** button.

WARNING! This action cannot be undone, so be careful about pushing this button.

5 Click **Yes** in the confirmation message to finalize; click **No** if you want to go back and review the sample again.

If Yes, the sample is finalized if it is complete. A warning appears if the sample is missing key care areas/residents.

6 If a warning message appears, select **Cancel** and add the recommended care areas/residents.

-or-

You can override the warning and proceed with sample finalization. You must provide a **Rationale** and select **Save**.

Note: In some cases, e.g., a selected resident does not have any defined care areas, you cannot override the warning and continue without addressing the issue.

7 When the sample finalization completes successfully, click **OK** to confirm.

When a sample is finalized:

- The Finalize Sample button title changes to Finalized and the checkmarks in the Sample column are disabled.
- Facility tasks triggered by the finalization (e.g., Personal Funds) now appear on the Facility Tasks screen.
- All residents—including system-selected and unnecessary meds—and investigative areas determined in the sample are listed on the Investigations screen. Surveyor assignments should have been made by now. However, any residents not assigned to a surveyor for investigation appear at the bottom of the list when the filter is set to **All Investigations**.

More ...

"Facility Tasks" on page 109
"Sample Finalization Tips" on page 201
"Resident Investigations" on page 130

Balance the Survey Team's Workload

The LTCSP application assigns the surveyors to the residents they added during interview, observations, and record review. Surveyors can be reassigned to better distribute the workload before finalizing the sample or conducting investigations.

The Workload screen provides a snapshot of how the work is distributed among the team members. You can access it from these screens:

- Closed Record Sample
- Finalize Sample
- Facility Tasks
- Investigations

Note: Remember that team coordinators can assign any survey team member; team members can only assign themselves.

To view workload:

1 Click the **View Current Workload** link on the Closed Record Sample, Finalize Sample, Facility Tasks, or Investigations screen.

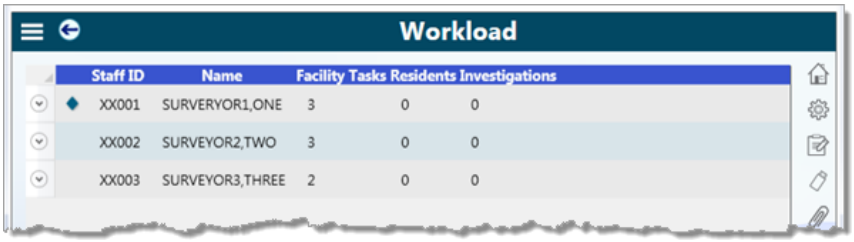


Figure 79: Workload screen

For each surveyor, the default view shows the number of assigned:

- Facility tasks
- Residents
- Investigations

2 Click the arrow to the left of a surveyor to display more detailed information.

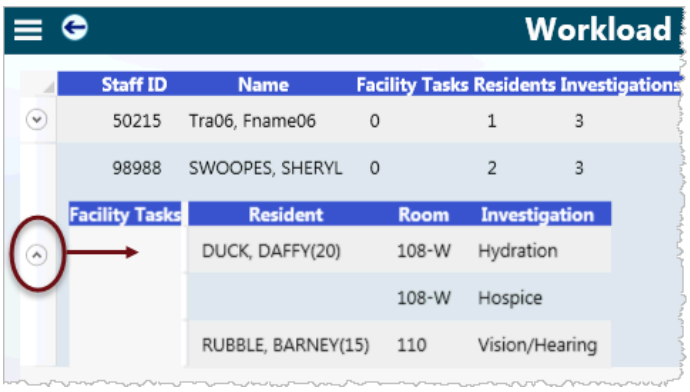


Figure 80: Workload details for a surveyor

3 Review the information to determine if adjustments are needed to balance the workload.

4 Reassign surveyors if needed.

Once the sample is finalized, go to the Investigations or Facility Tasks screen, as applicable, to adjust surveyor assignments.

More ...

"Assign Investigations" on page 133
"Assign Facility Tasks" on page 113

Closed Record Review Sample

The Closed Record Review (CRR) is considered a resident investigation. To begin the CRR, you need to finalize the CRR sample. The three status options that identify residents as CRR candidates and reflect discharges that occurred in the last 90 days (from date of survey shell export) are:

- **Expired**: resident died unexpectedly, i.e., was not on hospice and not terminal
- **Hospitalized**: resident was discharged to a hospital and did not return to the facility
- **Discharged to community**: resident was discharged and went home or to another nursing home

The candidates are listed on the Closed Record Sample screen and are either:

- Preselected by the application

  The system uses MDS data to automatically select three closed record review candidates, one with each status.
- Offsite selected residents identified as discharged during the initial pool process

Open the Closed Record Sample screen

To open the Closed Record Sample screen:

1. From the **Navigation** menu, select **Closed Record Sample**.

   The Closed Record Sample screen opens and lists CRR candidates. The System Selected column is marked for the three automatically selected residents.

The Instructions section is expanded by default; you can collapse it. The instructions may be especially helpful if there are multiple residents available for one of the closed record areas, or no residents for a care area.

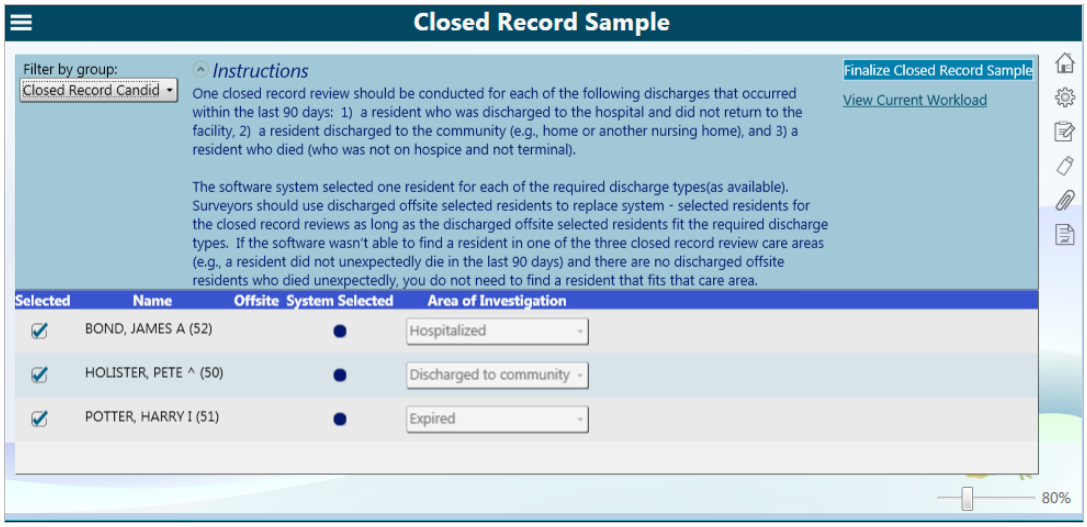


Figure 81: Closed Record Sample screen

2 Select the desired **Filter by group** option: **All Residents** or **Closed Record Candidates**.

Adjust the Closed Record Review Sample

The team coordinator can add or remove residents to/from the CRR sample as needed. For example, you might want to replace a system-selected resident if you have an offsite selected resident who left the facility and is a more appropriate candidate. If possible, ensure that your CRR sample includes one with each status.

To add or remove a CRR sample candidate:

1 In the **Closed Record Sample** screen, select or clear the **Selected** checkbox to add or remove a sample candidate.

2 To add a resident not listed as a CRR candidate, set **Filter by group** to **All Residents**, mark **Selected**, and choose the applicable **Area of Investigation**.

3 If you remove a system-selected resident, enter a rationale for your decision.

Finalize the Closed Record Review Sample

The team coordinator can finalize the CRR sample whenever the team has decided on the residents for the sample.

To finalize the sample:

1. Before finalizing the sample, review the candidates and compare them to the process recommendations.
2. In the **Closed Record Sample** screen, click the **Finalize Closed Record Sample** button and click **OK**.
   - The Finalize Closed Record Sample button title changes to Finalized in the Function toolbar and the checkmarks in the Selected column are disabled.
   - All residents in the CRR sample are included on the Investigations screen. The CRR candidates are not assigned to a surveyor. Since the default view on the Investigations screen is **My Investigations**, you need to change the filter to **All Investigations** to view and assign the CRR candidates.

   Once the CRR sample is finalized, surveyors can conduct closed record reviews, using the relevant pathway, from the Investigations screen at any time.

More ...

"Complete a Closed Record Review" on page 143

Facility Tasks

There are two types of facility tasks:

- Mandatory
- Triggered

All facility tasks have:

- A pathway to guide the investigation, i.e., Use, Instructions, Probes/CE
- Critical element (CE) questions answered by surveyors to identify whether the facility is in compliance or not
- A Notes fields for documenting the investigation
- Ability to display combined compliance decisions and documentation for a task being investigated by multiple surveyors
- Ability to add a new resident directly from a facility task screen

Other options available in certain facility tasks:

- Dining Observation and Kitchen provide a place to enter handwritten notes

- Beneficiary Protection Notification, Dining Observation, Environment, Infection Control, Medication Administration, Personal Funds, Resident Assessment, Resident Council, and Sufficient and Competent Nurse Staffing tasks also have a Resident Initial Pool Notes field where surveyor care area notes for residents listed in the facility task appear for all surveyors

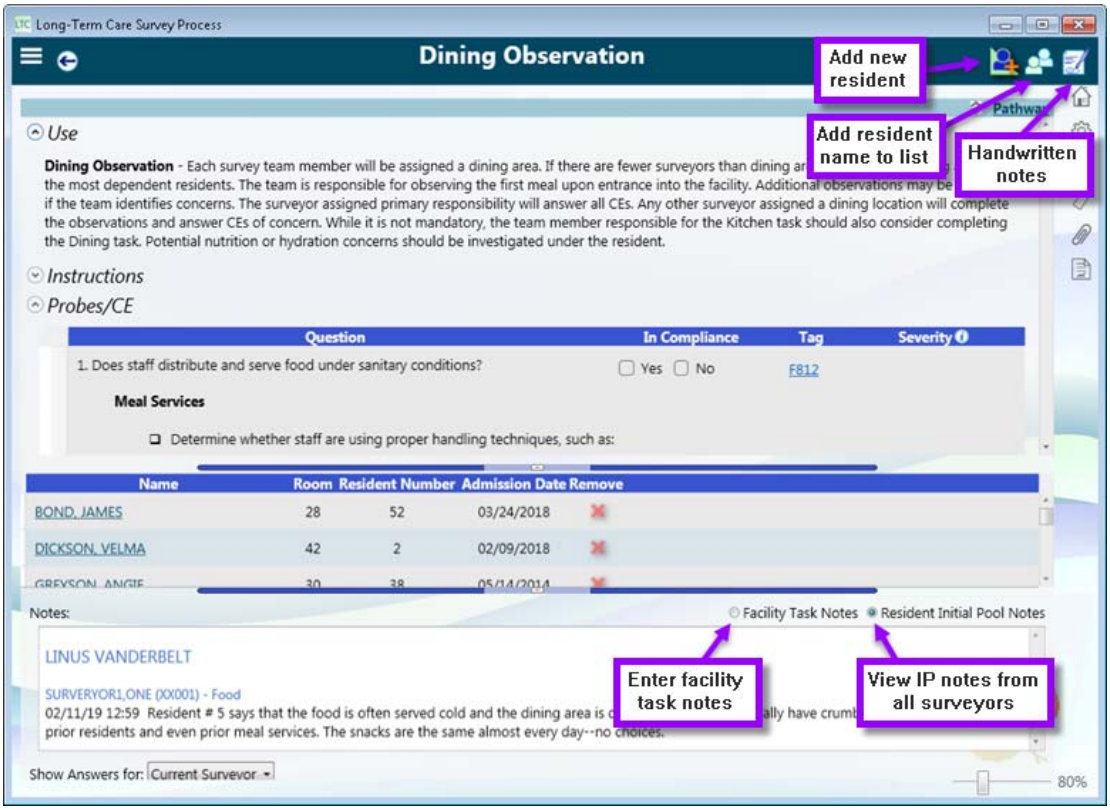


Figure 82: Dining Observation facility task

Facility tasks can be:

- Removed with justification rationale
- Initiated before they are triggered or if previously removed

More ...

"Facility Tasks Tips" on page 202

Mandatory Facility Tasks

Mandatory facility tasks are available any time during the survey.

- Beneficiary Protection Notification
- Dining Observation
- Infection Control
- Kitchen

- Medication Administration
- Medication Storage and Labeling
- Quality Assessment and Assurance and Quality Assurance Performance Improvement (QAA and QAPI)
- Resident Council
- Sufficient and Competent Nurse Staffing

  If Further Investigation was marked for Sufficient Staffing during the resident interview, those residents appear for this facility task after the sample is finalized.

Three mandatory facility tasks have unique features:

- Medication Administration
- Medication Storage and Labeling
- Resident Council

More ...

"Medication Administration" on page 122
"Medication Storage and Labeling" on page 127
"Resident Council" on page 127

Triggered Facility Tasks

There are three triggered facility tasks:

- Environment
- Personal Funds
- Resident Assessment
- Extended Survey (triggered from Potential Citations)

The Environment and Personal Funds tasks are triggered when certain care areas are marked for further investigation during an interview or observation. Resident Assessment is triggered when the MDS Discrepancy checkbox is selected for a CA and no concern is specified, or if there was a delay with the completion and/or submission of MDS assessment data.

When the TC finalizes the sample, triggered tasks automatically appear on the Facility Tasks screen. The resident(s) who were marked FI for the associated care area are listed for the facility task along with any notes.

Triggered facility tasks appear on the TC's Facility Task screen when the sample is finalized, and on team members' Facility Task screens after data is shared following sample finalization. If a triggered task does not appear on the screen after the sample is finalized, that task does not require an investigation.

Surveyors can initiate triggered tasks anytime during a survey. When initiated by a surveyor, a triggered task is immediately available.

More ...

"Non-mandatory Facility Task Triggers" on page 203

Open the Facility Tasks screen

From the Facility Tasks screen, you can:

- View the facility task list
- Assign tasks
- Initiate tasks
- Remove tasks

To open the Facility Tasks screen:

1 From the **Navigation** menu select **Facility Tasks**.

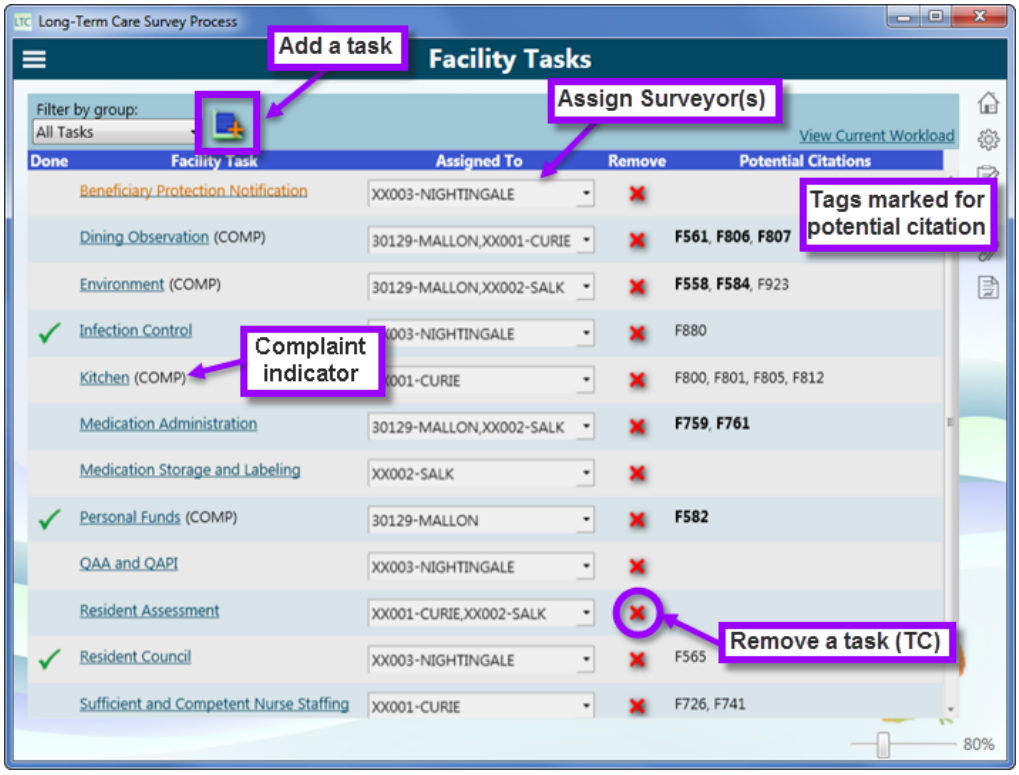


Figure 83: Facility Tasks screen

2 Select desired **Filter by group** option.

More ...

"Facility Tasks Tips" on page 202

Assign Facility Tasks

A surveyor must be assigned to a facility task to answer the Critical Element (CE) questions and enter notes. The team coordinator can assign facility tasks to any surveyor on the team. Team members can assign facility tasks only to themselves. Multiple surveyors can be assigned to a task. All surveyors can view those tasks they are not assigned to as read-only.

To assign a facility task:

1. Open **Facility Tasks**.
2. From the **Assigned To** drop-down list:
   - If you are the TC, select one or more surveyors or **All**.
   - If you are a team member, select yourself.
3. Click out of the drop-down list to close.

TIP: If a field that you need to edit is read-only, this means you are not assigned to the facility task. Click the Back button to return to the Facility Tasks screen and assign yourself to the task.

To remove a surveyor from a facility task:

1. Open **Facility Tasks**.
2. From the **Assigned To** drop-down list:
   - If you are the TC, remove the checkmark from one or more surveyors
   - If you are a team member, remove the checkmark from your name.
3. Click out of the drop-down list or press Escape to close.

Note: The system prevents you from unassigning any surveyor (including yourself) who has entered any facility task data.

More ...

"Open the Facility Tasks screen" on page 112
"Facility Tasks Tips" on page 202

Initiate a Facility Task

Although Environment, Personal Funds, Resident Assessment, Extended Survey facility tasks are triggered tasks, any surveyor can initiate (add) them at any time during the survey.

To initiate a facility task:

1 Open the **Facility Tasks** screen and select the **Add New Task** icon.

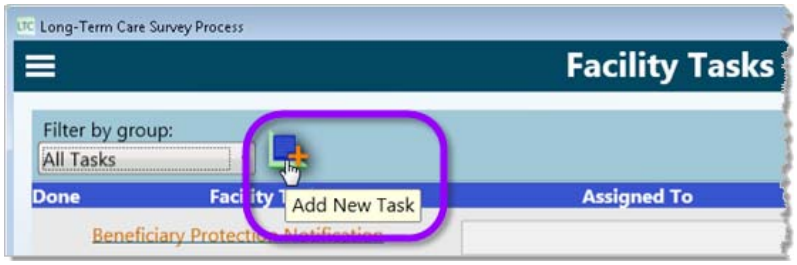


Figure 84: Add New Task icon

The Task field in the Select One or More Tasks window lists currently inactive tasks such as triggered tasks that have not triggered and tasks removed by the TC.

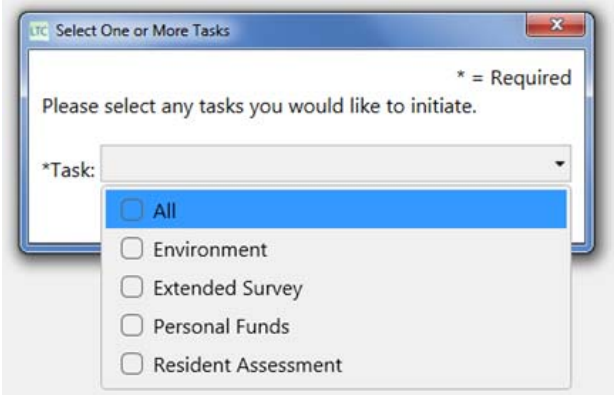


Figure 85: Select One or More Tasks window

2 Select the desired task(s) and click **Save**.

The new task(s) are added to the Facility Tasks list and are unassigned.

More ...

"Open the Facility Tasks screen" on page 112
"Facility Tasks Tips" on page 202
"Remove Facility Tasks" (below)

Remove Facility Tasks

The team coordinator can remove any facility task as necessary, but must provide a rationale. For some tasks, you can select from available rationale options; for others an explanation is needed.

Note: If you decide that you should complete a facility task that has been removed, you can re-add the removed task using directions above for initiating a facility task.

To remove a facility task:

1. Open **Facility Tasks**.
2. Click the red **X** in the **Remove** column for the applicable task.
3. Click **Rationale**.
4. Select a reason, or select **Other** and enter an explanation.
5. Click **Save**.

   The task is removed from Facility Tasks. It will appear in the Add New Task list in case you want to re-add the task.

More ...

"Initiate a Facility Task" on page 113
"Open the Facility Tasks screen" on page 112
"Facility Tasks Tips" on page 202

Open a Facility Task

On the screen for a specific facility task, you can:

- View task details
- Complete the task
- Add resident(s) to the task, if applicable

To open a facility task:

1. On the **Facility Tasks** screen, click a task name to open it.

   By default, individual facility task screens open with the Use section expanded, the Instructions section collapsed, and the critical element questions expanded under the header Probes/CE.

   The Probes/CE section shows the CE questions followed by the relevant probes below each CE. Some probes may apply to more than one CE. For example, the probes listed under CE1 on the Kitchen task screen also apply to CE2.
2. Expand and collapse sections as desired.
3. Resize sections using the blue Expander bars.
4. Use the **Pathway** link to open a PDF of the entire pathway.

   You can resize the PDF and LTCSP windows as needed to view the PDF along side the facility task screen.

5 Click the button to the left of the Pathway link to toggle expansion of the top section in the facility task.

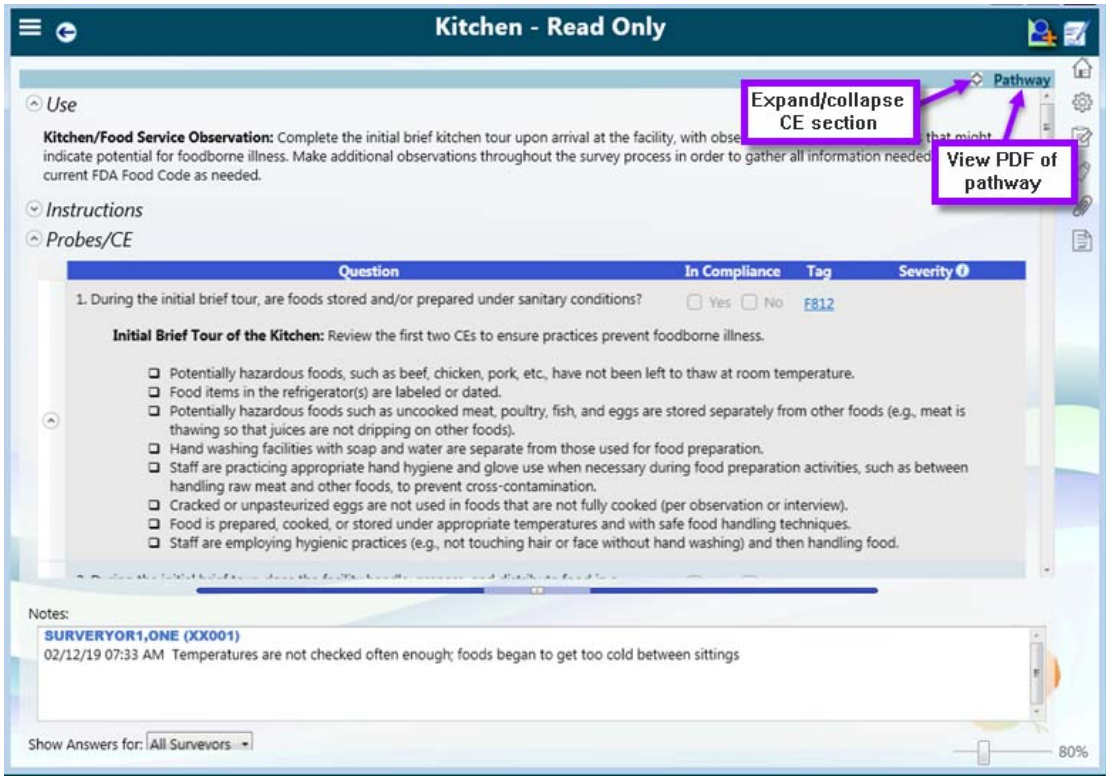


Figure 86: Kitchen—mandatory facility task

Note: Some facility tasks do not have instructions.

Facility tasks involving residents have a residents section, e.g., Dining Observation. Residents with MDS indicators for Weight Loss and

Dehydration and initial pool residents marked FI for Food, Nutrition, and Hydration are automatically listed on the Dining Observation screen.

Figure 87: Dining Observation—mandatory facility task with residents section

All triggered tasks include a residents section (showing Name, Room, Resident Number, and Admission Date) with notes about the residents from the initial pool. Individual notes can be viewed by clicking the resident name in the list or all resident notes can be viewed at once by selecting Resident Initial Pool Notes in the notes section.

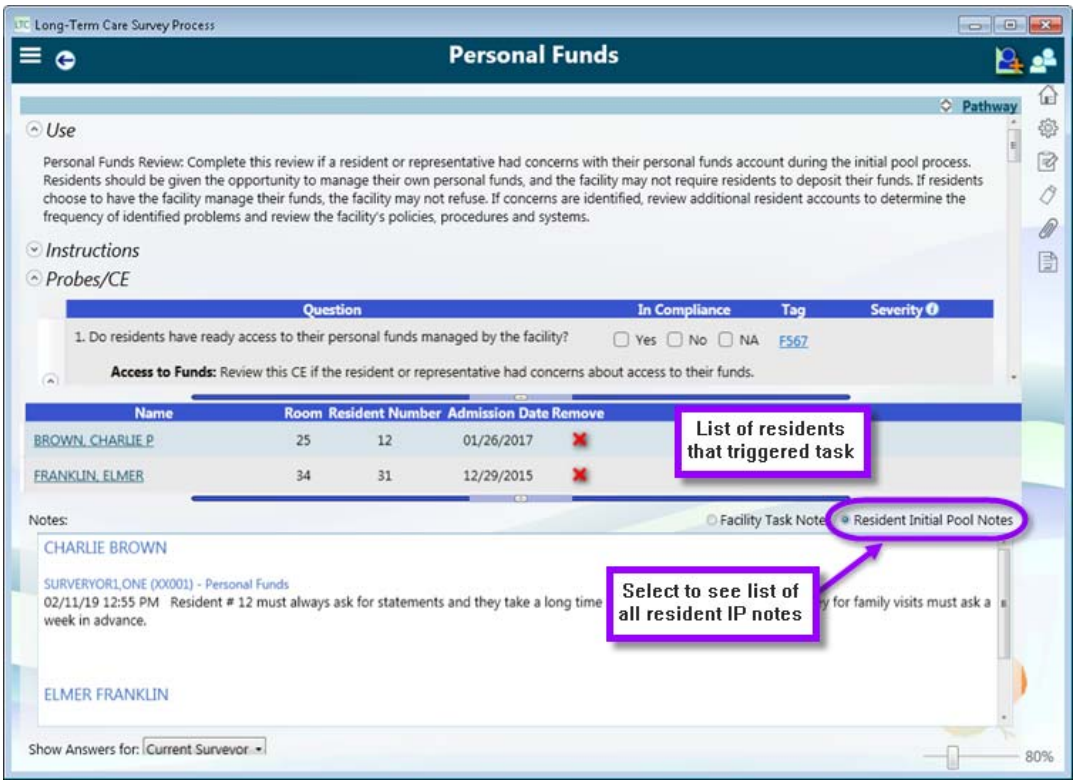


Figure 88: Personal Funds—triggered facility task with residents section

If there is a residents section, you can click a resident name to view any notes.

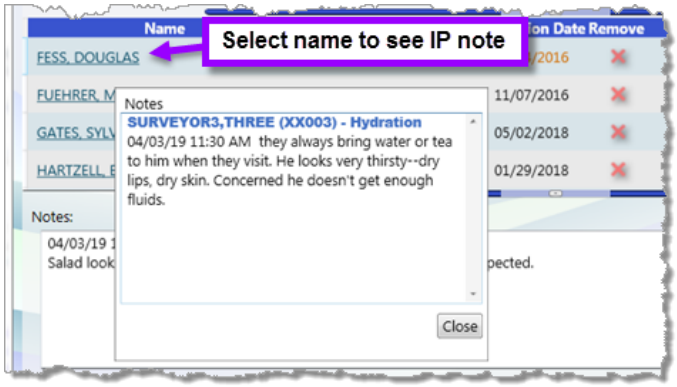


Figure 89: Facility Task resident notes

-or-

You can select **Resident Initial Pool Notes** above the notes field to see all the resident notes listed.

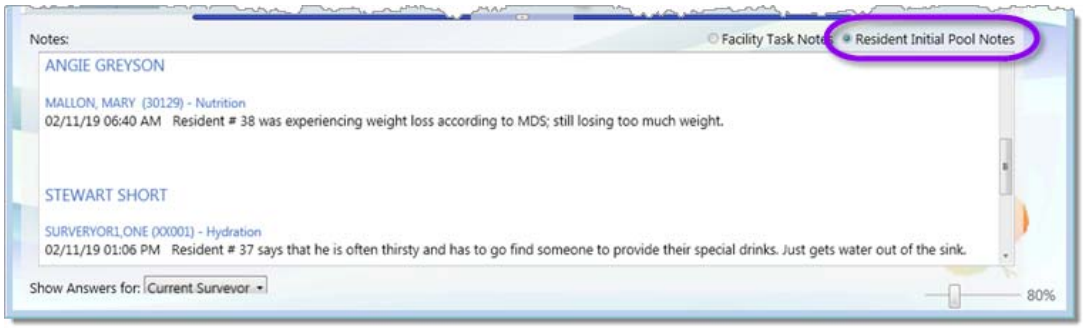


Figure 90: Facility Task Resident Initial Pool Notes listed

More ...

"Open the Facility Tasks screen" on page 112
"Expand/Collapse Sections" on page 22
"Resize Sections with Expander Bars" on page 23

Add/Remove Residents to/from Facility Tasks

If you discover during a task investigation that one or more residents has an issue and their names are not in the resident list, you can add them, including a new admission, to the task. Likewise, you can remove any resident from a task (except residents marked FI for Dining Observation). Beneficiary Protection Notification, Dining Observation, Environment, Infection Control, Personal Funds, Resident Council, and Sufficient and Competent Nurse Staffing have resident lists.

To add resident(s) to a task:

1. Open the task and click the **Add Residents** icon in the upper right corner.
2. In the **Choose Resident** window, select the checkbox for the resident(s) and click **OK**.

   The resident is added to the residents section.

To add a new admission to a facility task:

1. Click the **Add New Resident** button in the upper right.
2. Enter resident information and click **OK**.
3. The system assigns a unique resident ID and this resident is now available to add to the facility task from the resident list.

   Follow the above instructions to add the resident to the facility task.

To remove a resident from a task:

➥ In the resident section of the facility task, click the red **X** in the **Remove** column, and click **Yes** to the confirmation message.

The resident is removed from the residents section.

More ...

"Open a Facility Task" on page 115

Complete a Facility Task

To complete a facility task, surveyors must go through all CEs and determine compliance. Some facility task investigations will be done by more than one surveyor. For example, more than one surveyor will conduct a dining observation. In that case, CE decisions and notes from all the surveyors are combined after sharing data; any non-compliance decision will always override a compliance decision.

To complete a facility task:

1. Open the task.
2. Determine compliance for each CE.

   You can click a related tag number to review regulation text and interpretive guidance for additional information to make a compliance decision.
3. For **In Compliance**, select **Yes**, **No**, or **NA**, if available.

   Marking In Compliance as No activates the Severity levels. The tag related to the CE is added to the Potential Citations column for the task on the Facility Tasks screen and the tag is carried into Potential Citations.

   If there are multiple surveyors, notes and CE responses of No (non-compliance) from all surveyors are included for consideration in Potential Citations, but the highest severity for the task appears in the tag tree.

4 If the CE response is **No**, select a **Severity** level.

If a CE is not in compliance and there are multiple related tags (e.g., Medication Storage and Labeling CE 2), click **Select**, select the checkbox(es) of the relevant tag(s) for potential citation, choose **Severity** level, and click **Save**.

The selected tags are added to the Potential Citations column for the task on the Facility Tasks screen and carried into the Potential Citations screen.

TIP: To search a list of tags, enter applicable text in the Search box and click the magnifying glass to search; do *not* press Enter.

5 Add/remove resident(s) and enter notes with supporting details as needed.

6 When finished, click the **Back** button to return to **Facility Tasks**.

Tags marked for potential citation are listed in the Potential Citations column; those you marked appear in bold.

When a facility task is complete, a green checkmark appears in the **Done** column.

More ...

"Open a Facility Task" on page 115
"Add/Remove Residents to/from Facility Tasks" on page 118
"Potential Citations" on page 148
"LTCSP Notes" on page 24

Environment

The Environment facility task offers the option to select which areas of the task you will answer. Those areas not selected will be marked NA automatically so you only need to answer the CEs you are investigating.

Any surveyor assigned to the task can select the areas they are investigating.

After the TC finalizes the sample and the Environment task has been triggered (or when the task is initiated), the TC can open the Environment task without the Select Investigation Areas dialog opening to review the Resident IP Notes as long as no one is assigned to the task. Once surveyor assignments have been made, the Select Investigation Areas dialog appears the first time you open the Environment task.

To select Environment areas to investigate:

1 Make sure you are assigned to the Environment facility task; click Environment. The **Select Investigation Areas** dialog opens.

2 Select one or more areas that you will be investigating. Click **OK**.

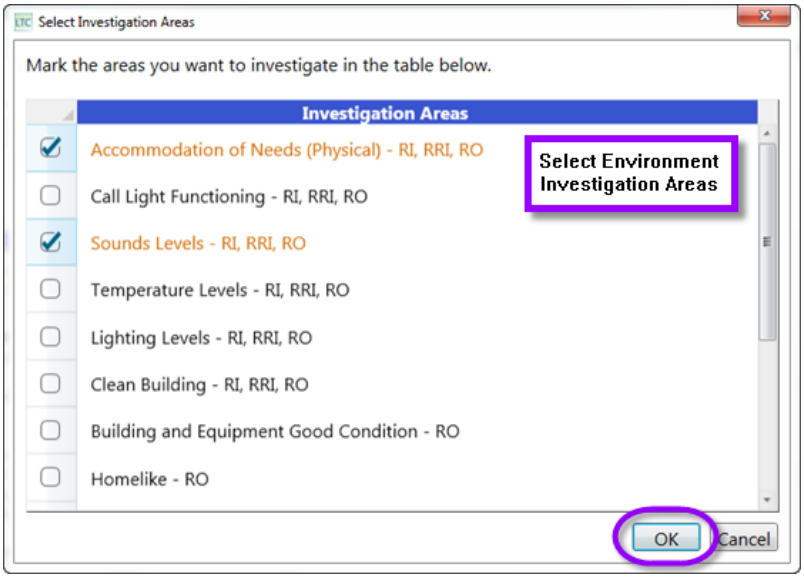


Figure 91: Select Investigation Areas dialog for the Environment Facility Task

3 The Environment facility task screen opens and all answers are NA except for those areas that you selected.

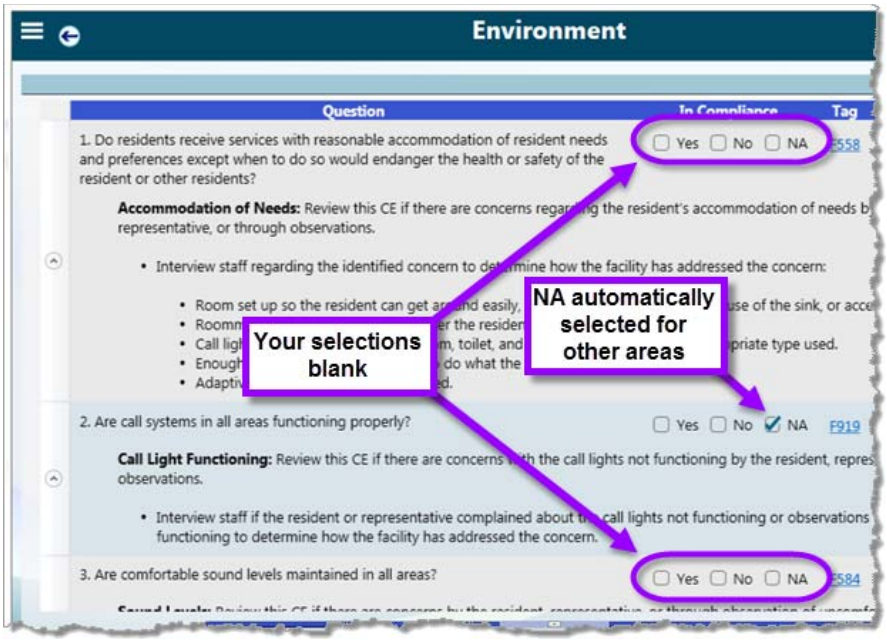


Figure 92: Environment screen with auto-filled NAs and blanks

If you want to change your selections, you can change the answers for any CE as you normally would, or you can access the **Select Investigation Areas** dialog from the Environment screen.

To change your selections in the Select Investigation Areas dialog

1. Click the **Task Matrix** icon in the upper right.
2. The **Select Investigation Areas** dialog opens; remove a selection or add new selections.
3. Click **OK**. As long as you did not answer any of the CEs for the areas you modified, the system will remove the NA answer from added areas and replace the blank answers with NA for the removed areas.

Figure 93: Task Matrix icon on the Environment screen

Medication Administration

The Medication Administration facility task consists of two main parts: CEs and medication administration observations. LTCSP has several features to support completing the task.

- Calculates the observed individual error rate (My Error Rate) when Total Number of Errors and Opportunities for Errors are entered.
- Displays individual observed error rate.
- Supports typed or handwritten Med Admin notes.
- After data share, LTCSP calculates the Team Error Rate

Determine Error Rate

You can enter Total Number of Errors and Opportunities for Errors in the Function toolbar on the Medication Administration screen or in the Med Admin notes screen.

To generate and view your observed error rate:

1. Open the **Medication Administration** task. You can generate or view the error rate here, as well as on the **Med Admin** screen (**Medication Administration Error Rate**).
2. Enter **Total Number of Errors** and **Opportunities for Errors** and click anywhere or press **Tab** to generate the error rate.

   Your observed error rate is calculated and shown in the **My Error Rate** field on the Medication Administration screen, and in the Medication Administration Error Rate field on the Med Admin screen.

To determine overall (team) observed error rate:

The error rate calculation on the Medication Administration and Med Admin screens reflects the individual surveyor's observed error rate.

If more than one surveyor completes this task, the combined error rate can be seen after sharing data and then viewing answers for All Surveyors. A combined team error rate information statement can also be pasted into the Medication Administration Notes field.

To generate the combined error rate if more than one surveyor completes the Medication Administration observations:

➥ All surveyors who completed medication administration observations should enter their error rate information.

➥ The team (or at least these surveyors and TC) share data.

➥ View the team totals:

- Open the Medication Administration facility task.
- Change the **Show Answers for** to **All Surveyors**.

The combined observed error rate appears in the **Team Error Rate** field.

- To view the combined error rate in the Facility Tasks report:

➥ After sharing data, run the Facility Tasks report to see the combined (team) observed error rate, as well as a breakdown by each surveyor in the Medical Administration section.

To paste combined team error rate statement:

1 Once you share data and have the team error rate, click in the Medication Administration Notes field.

TIP: If you paste in the error rate before you've done a data share with the others who completed the error rate, the system will use your error rate numbers in the statement. Once the team has shared data, the system will always use the team error rate for the statement.

2 Click the **Paste Med Admin Rate** icon (or **Alt** + **M**). The system inserts a statement with the total number of errors, total number of opportunities for error, and the error rate percentage.

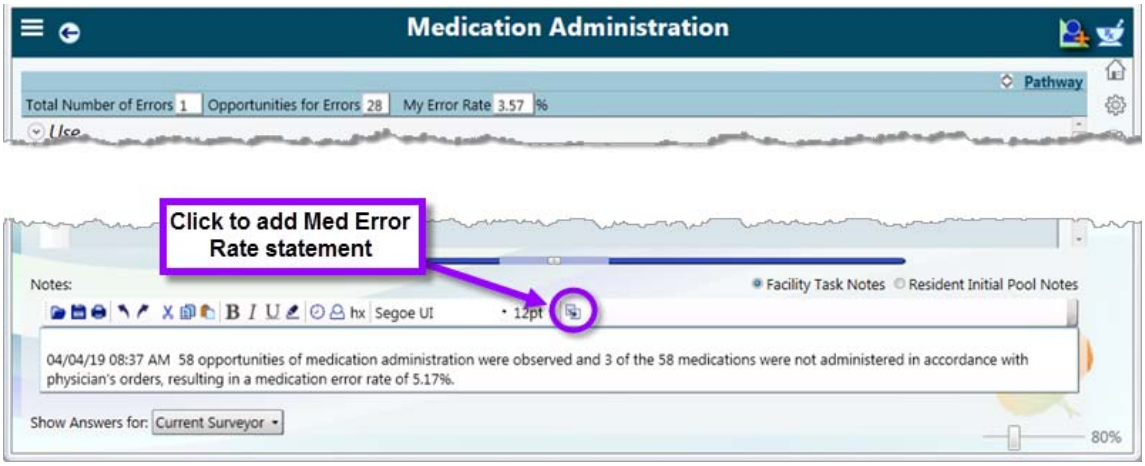


Figure 94: Team error rate statement inserted into Med Admin Notes

More ...

"Open a Facility Task" on page 115
"Generate Reports" on page 33

Enter Med Admin Notes

You can type medication administration observations in the text editor or use a stylus to enter your notes in the handwriting panel.

To open Med Admin notes:

1 Open the **Medication Administration** facility task.

2 Click the **Med Admin Observations** icon in the upper right corner.

Figure 95: Med Admin Observations icon

By default, the Med Admin notes screen opens with the text editor and handwriting panel both displayed.

3 At the bottom of the screen, select **Show text editor** and/or **Show handwriting panel** to display and use the text editor and/or handwriting panel. Select another surveyor from the Staff ID dropdown to view their Med Admin notes (after data share).

Figure 96: Text editor and handwriting panel options for Med Admin

Note: Notes entered here do not carry forward to the Potential Citations screen. If non-compliance is determined, you should document the applicable information in the Notes section on the Medication Administration screen.

To edit text in the handwriting panel:

➥ Use the Write/Erase radio buttons in the upper right.

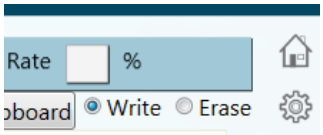


Figure 97: Write/Erase buttons for handwriting panel

To copy text from the handwriting panel to the text editor:

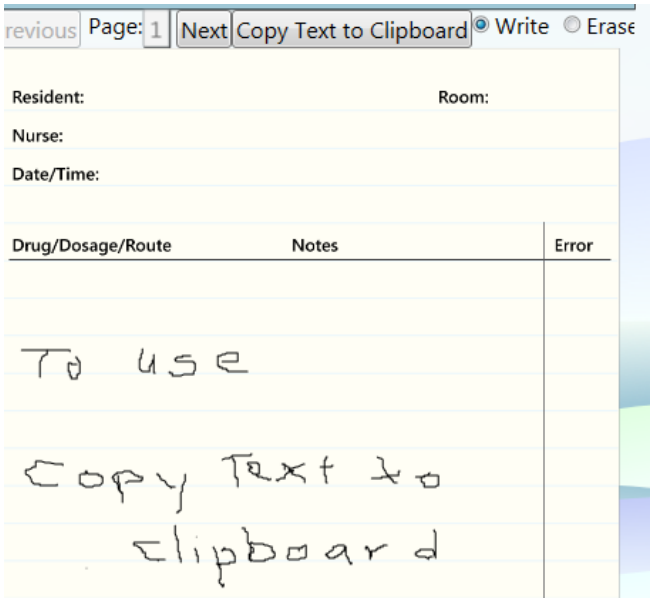


Figure 98: Handwriting panel with notes entered

1. If you have multiple pages of handwritten notes, click **Next** or **Previous** to navigate through the pages.

Figure 99: Next and Previous buttons in handwriting panel

2. To copy all handwritten text, select **Copy Text to Clipboard**.
3. Click in the text editor window.
4. Select the **Paste** icon, or press **CTRL + V** to paste the text.

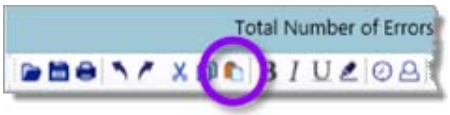


Figure 100: Paste icon in text editor

The text should now be pasted into the text editor. You can also paste this text into other notes fields, e.g., Surveyor Notes.

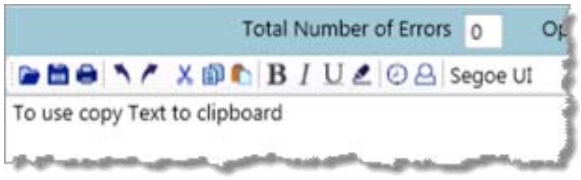


Figure 101: Text editor after copying and pasting text from clipboard

More ...

"Medication Administration" on page 30

Medication Storage and Labeling

Medication Storage and Labeling has the following task-specific features:

- Fields for entering the number of med storage rooms and carts at the facility
- Once the numbers are entered, automatic calculation of how many med storage rooms and carts need to be reviewed by the survey team

To automatically determine how many rooms and carts to evaluate:

1. Open the **Medication Storage and Labeling** facility task.
2. Enter the **Number of med storage rooms the facility has**.
3. Enter the **Number of med carts the facility has**.
4. Click anywhere on the screen or press **Tab**. The system performs the calculation and displays the result next to the numbers fields: **You should review <number> med storage rooms and <number> med carts**.

   If you entered an incorrect room or cart number, simply change the number and recalculate.

More ...

"Open a Facility Task" on page 115

Resident Council

The Resident Council facility task is similar to other facility tasks where you can track residents, but includes several unique features.

- In the **Resident Council** column, you select **Yes** or **No** for each CE based on what residents say during the meeting.

  If you select **No** for **Resident Council**, the In Compliance column is activated. Once you conduct an investigation of the residents' concern(s),

you will mark **In Compliance** as **Yes** or **No**. If the CE is not in compliance, select a **Severity** level.

Figure 102: Resident Council CE

CE 24 works uniquely. Unlike the other CEs, selecting **Yes** for **Resident Council** activates the **In Compliance** options. If **In Compliance** is **No**, click **Select** to open the **Select Non-Compliant Tags** window, which lists other F-tags. Select the applicable tag(s) for potential citation, select **Severity**, and **Save**.

The screen will not display the tag numbers selected or their severity, but the tag numbers will be listed in the Potential Citations column for the task on the Facility Tasks screen. You must open Select Non-Compliant Tags to view the selected tags. If you select No for Resident Council, or Yes for Resident Council and No for In Compliance, you can still view the list of tags by clicking Select, but you will not be able to cite them.

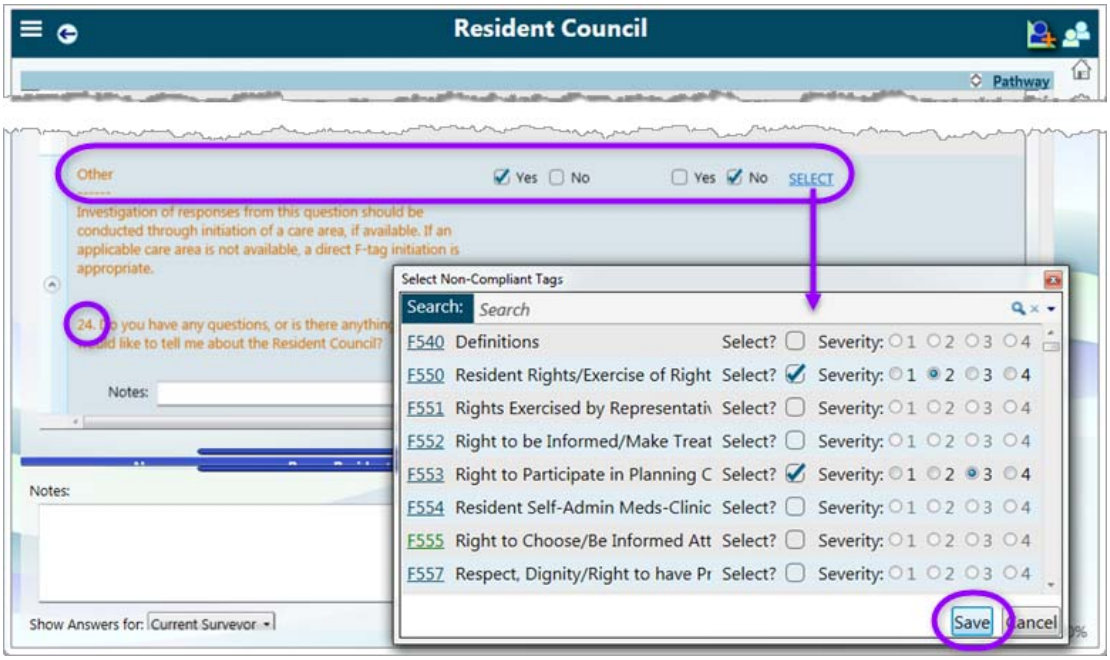


Figure 103: Resident Council CE 24, Other, Non-compliance tags

- CE-specific notes function like other notes fields in the application. Your first entry is automatically time stamped.

Note: information entered in CE-specific notes does not carry forward to the Potential Citations screen.

Figure 104: Resident Council: CE-specific note

- **Other** column in the residents section

  Indicate if the resident is the President of the resident council, or whether or not the resident attends Resident Council meetings regularly.

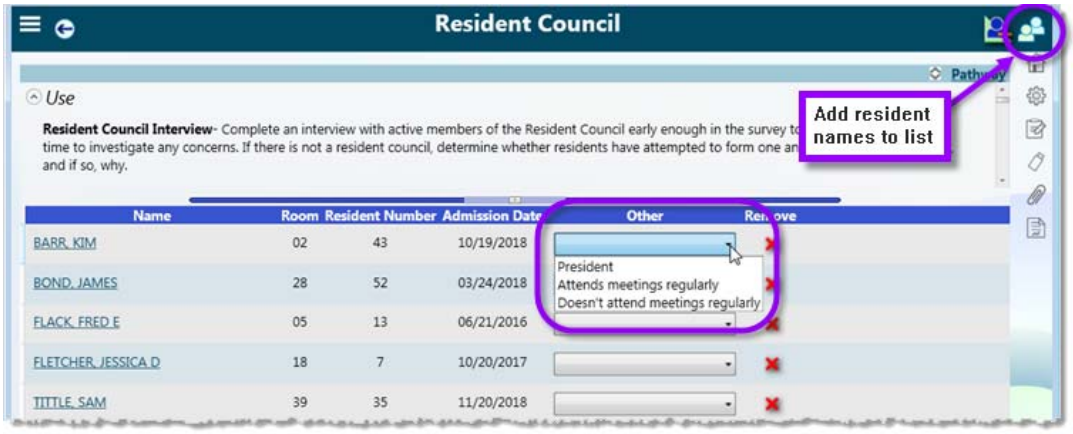


Figure 105: Resident Council: Other field in residents section

Resident Investigations

After the sample is finalized and closed record residents are selected, you are ready to conduct the investigations and determine compliance. Initial pool notes about residents included in the sample are carried forward to investigations.

The Investigations screen provides information on all residents and care areas being investigated. The "Investigation by …" screen, which is opened from Investigations, provides information about an individual investigation by resident or investigative area (including care areas with or without CE pathways and tags).

Open the Investigations screen

On the Investigations screen, you can:

- View investigative areas by resident
- Add or remove investigative areas
- Open the **Investigations by Care Area** or **by Residents** screen for a resident or investigative (care) area
- Adjust surveyor workload

To open the Investigations screen:

1 From the **Navigation** menu, select **Investigations**.

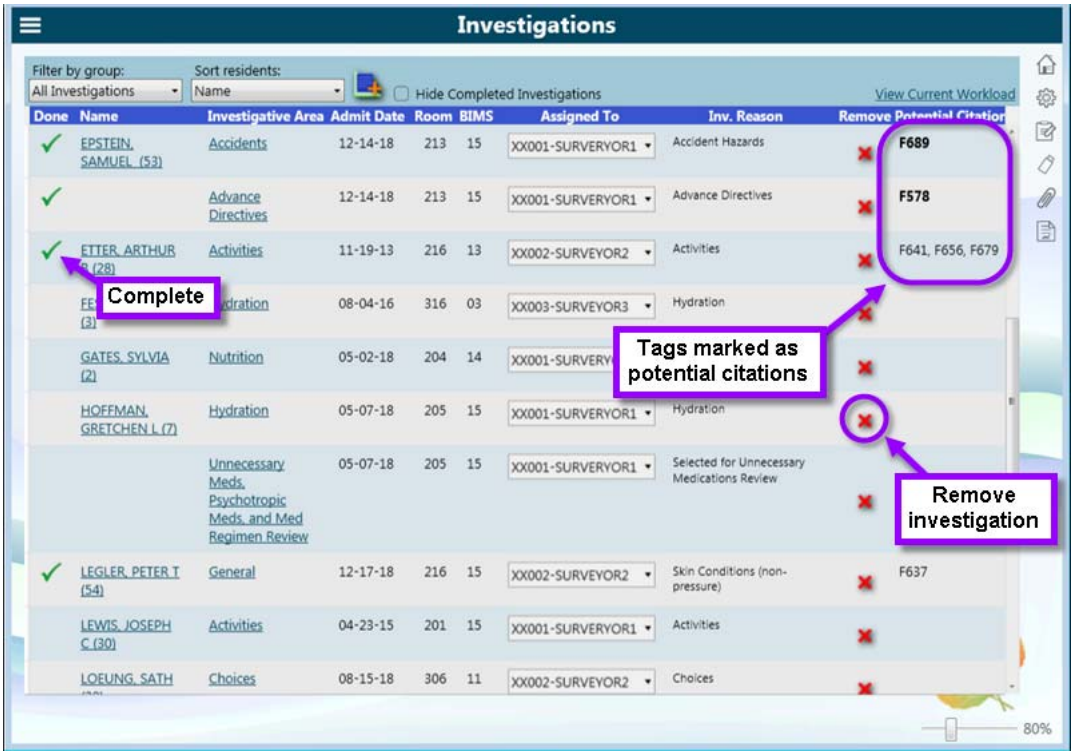


Figure 106: Investigations screen

The Investigations screen filter is set to My Investigations by default. It displays residents assigned to you on the Finalize Sample screen and may include your initial pool residents added to the final sample, unnecessary meds candidates, or Closed Record Review candidates. Any residents that you initiated an investigation for also appear on this list.

If you change the filter to All Investigations, the screen displays all residents with an investigation even if they are not assigned to a surveyor. The list includes all residents added to the final sample, initiated investigations, the five unnecessary meds candidates and the Closed Record Review candidates once that sample is finalized.

Both views also list any tags marked for potential citations for each investigation.

TIP: Be sure to finalize the Closed Record Review sample to ensure CRR candidates are included on the Investigations screen. Select All Investigations to assign CRR investigations to surveyors.

Information on the Investigations screen includes resident's name; investigative area (care area or initiated tag); resident's admission date, room number, BIMS score; surveyor assigned to the investigation; and reason for the investigation, which is the care area that triggered the investigation, or that it was initiated or calculated, like unnecessary meds.

2 Select the desired **Filter by group** and **Sort residents** options.

My Investigations and **Name** are the respective default settings.

TIP: To see CRRs or Unnecessary Meds investigations not assigned to you, set **Filter by group** to **All Investigations**.

More ...

"Finalize the Closed Record Review Sample" on page 109
"Initiate a Tag" on page 143

Investigations Filter and Sort

The filter and sort functions for the Investigations screen are similar to those in the Resident Manager. You can filter the list to display the information you need.

The **Filter by group** options are:

- **My Investigations**: Displays only investigative areas/residents assigned to you. Selected by default.
- **All Investigations**: Displays all investigative area/residents including those that are unassigned. This view may help the team coordinator manage the survey. For example, residents selected for Closed Record Review may need to be assigned to surveyors.

The **Sort residents** options are:

- **Name**: Sorts residents alphabetically by last name with all associated investigative areas for each resident sorted alphabetically.
- **Room**: Sorts listed residents in ascending order by room number.
- **Surveyor**: Groups residents by surveyor with surveyors listed alphabetically by last name and all residents assigned to each surveyor listed alphabetically. Unassigned residents are listed alphabetically at the bottom.
- **Investigative Area**: Groups residents by Investigative Area (IA) with IAs listed alphabetically and all associated residents for each IA listed alphabetically by last name. This sort facilitates assigning surveyors by area. For instance, use it to assign all nutrition investigations to the nutrition expert on the team.

Assign Investigations

Like facility tasks, a surveyor must be assigned to an investigative area/resident to answer CE questions and enter notes. LTCSP uses the surveyor assignments from the Finalize Sample screen. Unless changed by the team coordinator during the sample meeting, residents assigned to a surveyor in their initial pool stay assigned to that surveyor. The TC can assign unnecessary meds candidates on the Final Sample screen or on the Investigations screen. Closed Record Review candidates, once the sample is finalized, must be assigned to a surveyor on the Investigations screen.

The team coordinator can assign investigative areas/residents to any surveyor on the team. Team members can assign investigative areas/residents only to themselves. Multiple surveyors can be assigned to an investigative area unlike an Interview, Observation, and Record Review. All surveyors can view investigations they are not assigned to as read-only.

To assign an investigative area/resident to surveyor(s):

1. On the **Investigations** screen, find the investigative area/resident.
2. From the **Assigned To** drop-down list for the resident:
   - If you are the TC, select one or more surveyors or All.
   - If you are a team member, select yourself.
3. Click out of the list box or press **Escape** to close.

TIP: If you find an investigative area you need to complete is read-only, go the Investigations screen and assign yourself to the investigation.

To unassign surveyor(s) from an investigative area/resident:

1. On the **Investigations** screen, find the investigative area/resident.
2. From the **Assigned To** drop-down list for the resident:
   - If you are the TC, remove the checkmark(s) for the surveyor(s) you want to unassign.
   - If you are a team member, remove the checkmark by your name.

   Note: You are prevented from unassigning any surveyor (including yourself) who has entered any investigation data.

   ---

3. Click out of the list box or press **Escape** to close.

More ...

"Open the Investigations screen" on page 130

Add Investigations

During the course of an investigation, a surveyor may want to add a new investigative area for a resident even though the investigative area or resident were not included in the sample.

To add an investigative area for a resident:

1. On the **Investigations** screen, click the **Add New Investigation** icon in the Function toolbar.
2. In the **Initiate One or More Investigations** dialog, select the applicable resident from the **Resident** drop-down list.
3. From the **Investigation** drop-down list, select the desired investigative area(s).

   Only investigative areas that have not been assigned to the resident appear in the list.
4. Click **Save**.

   The new investigative area(s) for the resident appear on the Investigations screen. The investigation(s) are automatically assigned to you and the **Inv. Reason** column shows that the investigation was initiated by you.
5. Repeat this procedure as needed to add other residents to the investigative area.

More ...

"Open the Investigations screen" on page 130

Remove Investigations

If you decide to remove a resident from an investigative area (e.g., because another resident is a better candidate), you need to provide a reason for the removal. To remove an investigative area, you would remove all associated residents. Surveyors can only remove investigations they are assigned to. The team coordinator can delete any investigation.

To delete an investigative area for a resident:

1. On the **Investigations** screen, find the resident/investigation and click the red **X** at the end of the row.
2. Enter the **Rationale**, and click **Save**.

   The investigative area for the resident is removed from the Investigations screen.

More ...

"Open the Investigations screen" on page 130

Open an Investigation

Individual investigations are opened from the Investigations screen. There are two different views:

- Investigation by Resident

  The pullout menu on the right shows all investigative areas for the resident assigned to you.

- Investigation by Care Area

  The pullout menu on the right shows all residents for the investigative area assigned to you.

Surveyors can choose the view they prefer and switch between views. On the Investigation screens, you can:

- Review investigation information and pathway
- Mark each CE compliant or not
- Assign severity
- Enter notes

To open an investigation:

1. From the **Navigation** menu, select **Investigations**.
2. In the **Name** column, click a resident's name to open the **Investigation by Resident** window.

   -or-

   Click an **Investigative Area** to open the **Investigation by Care Area** window.

   You can expand and collapse sections as desired, and resize using the Expander bars.

More ...

"Open the Investigations screen" on page 130
"Investigation screen layout" below
"Expand/Collapse Sections" on page 22
"Resize Sections with Expander Bars" on page 23

Investigation screen layout

Whether investigating by resident or investigative area, the screen layout is the same.

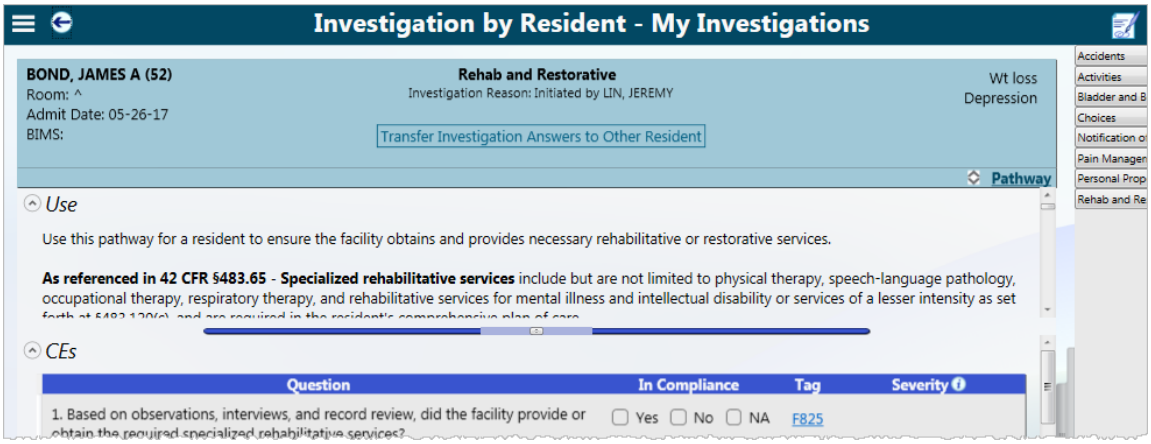


Figure 107: Investigation by Resident screen

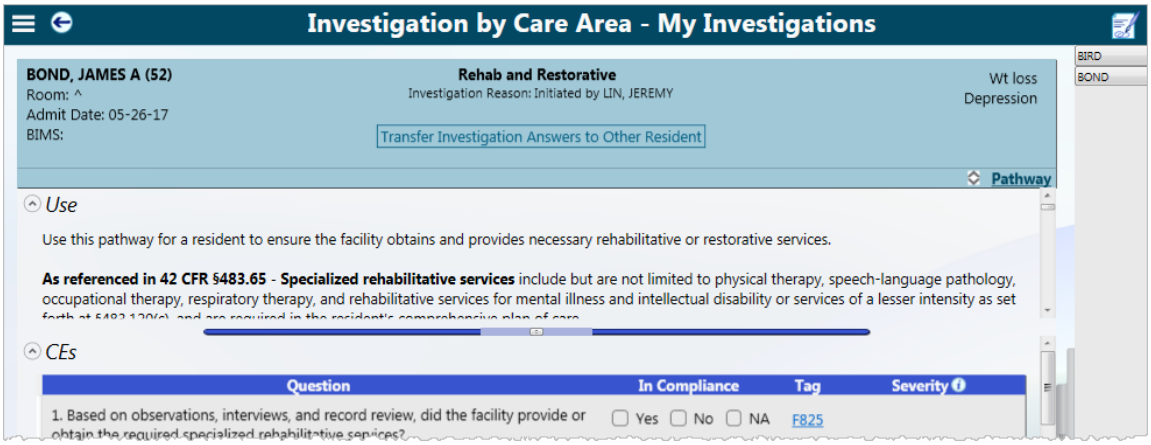


Figure 108: Investigation by Care Area screen

- **Care Area / Resident menu**

  Appears at the top on the far right. Provides easy navigation among care areas/residents while conducting investigations. On the Investigation by Resident window, lists all investigative areas for the selected resident. On the Investigation by Care Area window, lists all residents assigned to the investigative area.

- **Resident information**

  Appears at the top on the left.

- **MDS indicators**

  Resident MDS indicators appear at the top on the right.

- **Pathway Link**

  Pathways (comprising Use, Instructions, Observations, Interviews, Record Review, Other Considerations, CEs) guide investigations. If an investigative area does not have a pathway (e.g., Care Plan), it is noted. In that case the only guidance available is regulation text and interpretive guidelines for the related tag(s).

  ➥ Click the **Pathway** link to display the full investigation pathway as a PDF.

- **Investigation Pathway**

  Use, Instructions, Observations, Interviews, Record Review, and Other Considerations are located in the top section, expanded by default. You can collapse each section by clicking the arrow in front of the section label. When they are expanded, use the scroll bar to see all of the content.

Figure 109: Investigation pathway top sections expanded

Note: Some of these sections may not have information for some investigations.

- **CEs**

  Critical Elements for the investigation follow Use, Instructions, Observations, Interviews, Record Review, and Other Considerations. Click the arrow to expand and collapse; use the Expand icon in the expander bar to expand to full screen. Surveyors can indicate compliance, mark tag(s) for potential citation and assign severity as necessary. Click a tag link (number) to display regulation text and interpretive guidelines.

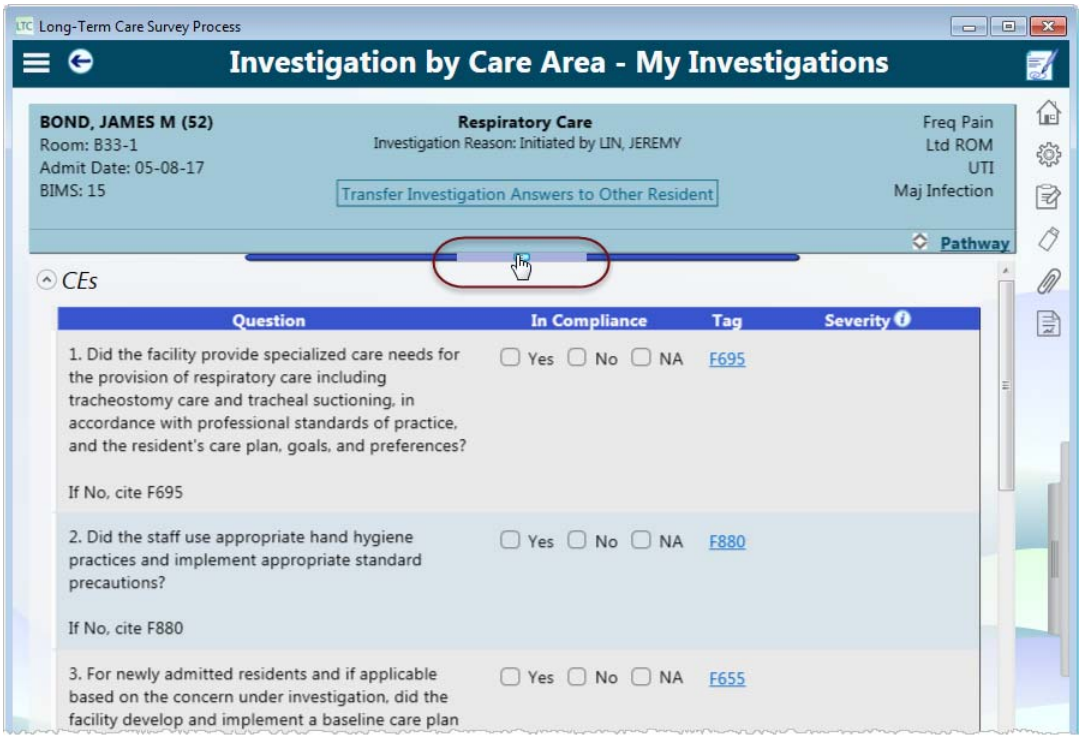


Figure 110: CE expanded

- **Investigation / Resident Notes**

  Use the Notes field to enter Investigation and/or Resident Notes or to access your Investigation Notes history.

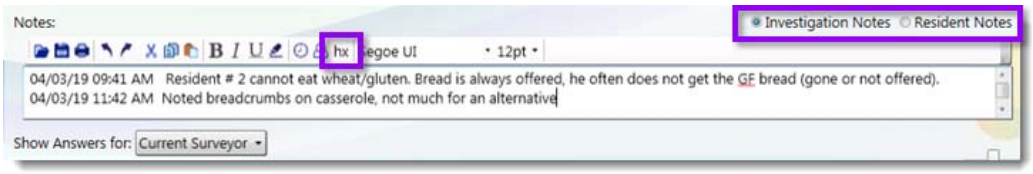


Figure 111: Investigation Notes

More ...

"Resize Sections with Expander Bars" on page 23
"Investigation Notes" on page 30
"Notes History" on page 31

- **Drawing Tool**

  Use this tool to add visual supporting documentation.

  ➥ Click the **Draw** icon in the upper right to open the drawing tool, then draw or write on the page.

  In the Pressure Ulcers and Abuse investigative areas, the drawing tool icon changes to a body. You can document locations of pressure ulcers or other injuries on a body image.

  ➥ Click the **Map Pressure Ulcers** icon in the upper right to open the body images, then use the pen to show locations and write any additional notes.

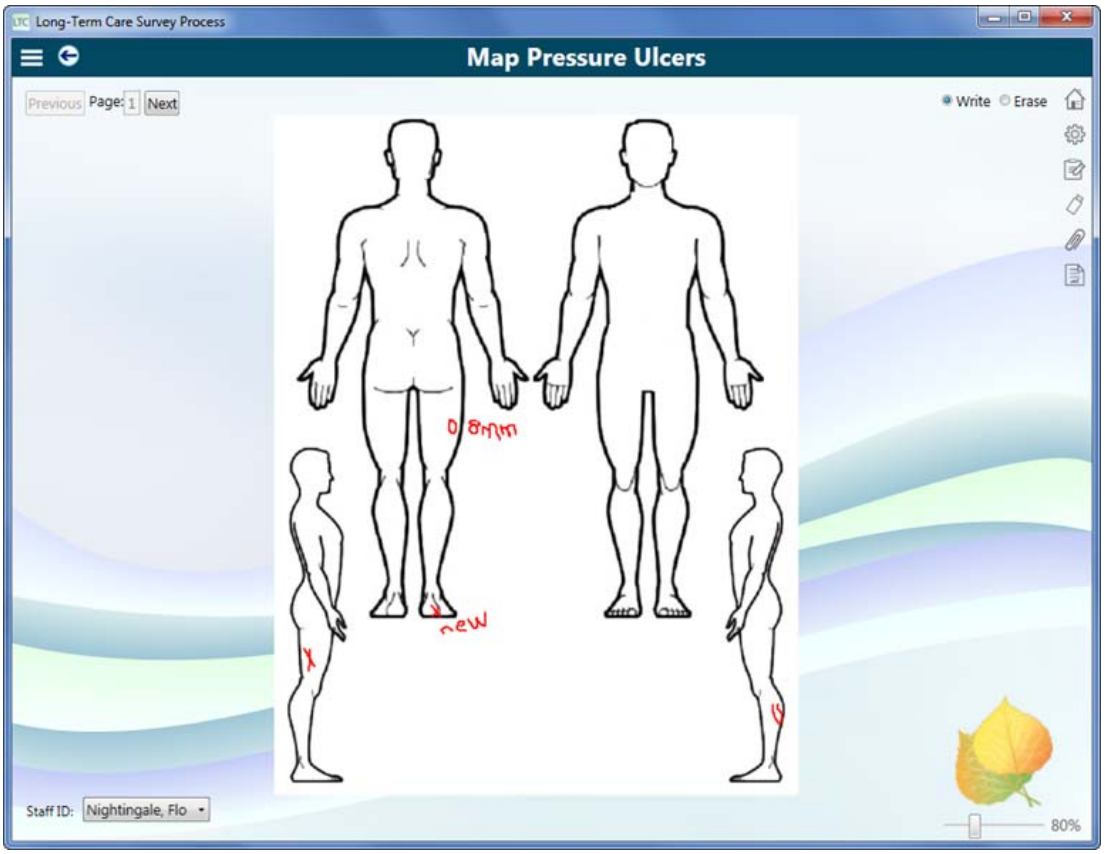


Figure 112: Map Pressure Ulcers

Note: After data share, you can view another surveyor's drawings. Select their name from the Staff ID dropdown.

More ...

"View Body Map and Drawings for any Surveyor" on page 31

- **Weight Calculator**

  The weight calculator tool available in the Resident Interview, Observations, and Record Review is also available in the Nutrition investigation to determine weight gain/loss. Click the **Weight Calculator** button in the Function toolbar to open.

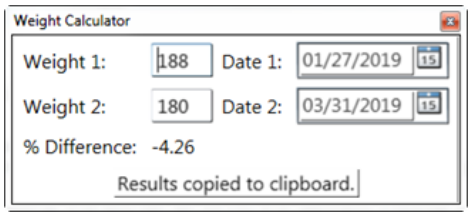


Figure 113: Weight Calculator

To calculate weight loss/gain for a resident:

1. Click the **Weight Calculator** button.
2. Enter the first weight and associated date.
3. Enter the second weight and associated date.

To paste the weight loss/gain statement into Investigation Notes:

1. Click the **X** to close the calculator.
2. Click in Investigation Notes where you want the statement to paste.
3. Click the **Paste Weight Calculation icon**, or press **Alt** + **W**.

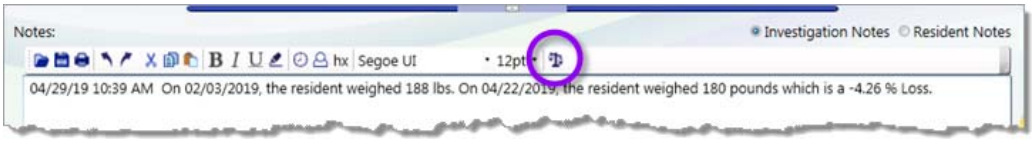


Figure 114: Weight calculator (top) and example of message inserted

Complete an Investigation

To complete an investigation, you will:

- Determine compliance for all CEs
- Mark all CEs as compliant or not
- Assign severity
- Enter supporting notes

Some investigations may be done by more than one surveyor. In that case, data and notes from all surveyors are combined after data share.

To complete an investigation:

1. From the **Investigations** screen, open **Investigation by Resident** or **Investigation by Care Area**.

2 Determine compliance for each CE.

Critical element questions includes details from the pathway (when there is one) explaining all the factors that should be considered when making a compliance decision. You can click a related tag number to review regulation text and interpretive guidance for additional information to make a compliance decision.

3 For **In Compliance**, select **Yes**, **No**, or **NA**.

Marking **In Compliance** as **No** activates the Severity levels and the related tag is automatically carried into Potential Citations.

If there are multiple surveyors, notes and data from all surveyors are included for consideration in Potential Citations, but the highest severity for the investigation appears in the tag tree.

4 Enter notes with supporting details as needed.

5 When you are done, click the **Back** arrow to return to **Investigations**.

When a resident investigation is complete (i.e., all CEs are complete whether in compliance or not), a green checkmark appears on the Investigations screen in the Done column for the investigative area/resident.

Figure 115: Completed investigative areas marked on Investigations screen

A green checkmark is also added to the care area/resident in the menu (far upper right) in the **Investigation by Resident** and **Investigation by Care Area** screens.

Figure 116: Resident marked complete in Investigation by Care Area window

More ...

"Open an Investigation" on page 135
"Resident Investigations Tips" on page 204
"Potential Citations" on page 148

Transfer Investigation Answers to Another Resident

If you accidentally enter CE answers under the wrong resident, you can transfer the answers to the proper resident. You can only transfer answers to a resident who has the same investigative area assigned. CE answers are transferred, but notes are not transferred.

To transfer CE answers to another resident:

1. Click **Transfer Investigation Answers to Other Resident**.
2. Select the correct resident from the list.

   Only residents assigned to the same investigative area are listed. If any relevant investigation notes were entered for the "wrong" resident, you must copy and paste them into the notes for the "right" resident.

Complete a Closed Record Review

Once the CRR sample is finalized, surveyors can conduct closed record reviews from the Investigations screen at any time. Be sure to conduct these reviews early enough in the survey to give the team time to investigate any potential concerns. A surveyor must be assigned to a CRR investigation to complete it.

To complete a closed record review:

1. Open the **Investigations** screen.
2. Locate a resident marked for CRR (Inv. Reason is Selected For Closed Record Review).
3. If necessary, assign yourself as surveyor: for **Assigned To**, select yourself.
4. Click the resident's name to open the CRR investigation.
5. Proceed as for a resident investigation, that is:
   - Determine compliance for all CEs
   - Mark all CEs as compliant or not
   - Assign severity
   - Enter supporting notes
6. When you are done, click the **Back** arrow to return to **Investigations**.

   A green checkmark in the Done column indicates that this CRR Investigation is complete (i.e., all CEs are complete whether in compliance or not).

More ...

"Open the Investigations screen" on page 130
"Complete an Investigation" on page 140
"Resident Investigations Tips" on page 204
"Potential Citations" on page 148

Initiate a Tag

If you need to cite an area not covered by an investigation, you can initiate a tag. To do this, you add an F-tag Initiation investigation in order to directly cite the relevant F-tags(s).

To add an F-tag Initiation investigation:

1. On the **Investigations** screen, click the **Add New Investigation** icon in the Function toolbar.
2. In the **Initiate One or More Investigations** window, select the applicable resident from the **Resident** drop-down list.

3 From the **Investigation** drop-down list, select **FTag Initiation** and click **Save**.

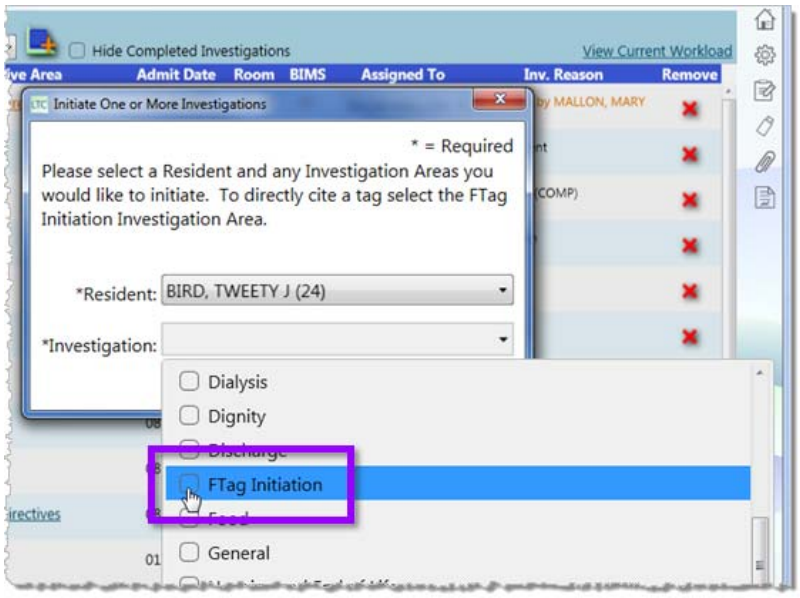


Figure 117: Add FTag Initiation investigation

The FTag Initiation investigative area for the resident is added to the Investigations screen. The Inv. Reason column shows that the investigation was initiated by you.

4 Repeat this procedure as needed to add other residents to the FTag Initiation investigation.

To complete an F-tag Initiation investigation:

1 In the **Investigative Area** column, select **FTag Initiation** to open the investigation.

Note: There is no pathway and no tags are listed for the investigation.

2 Below CEs, click **Select Tags** to choose tag(s) for direct citation.

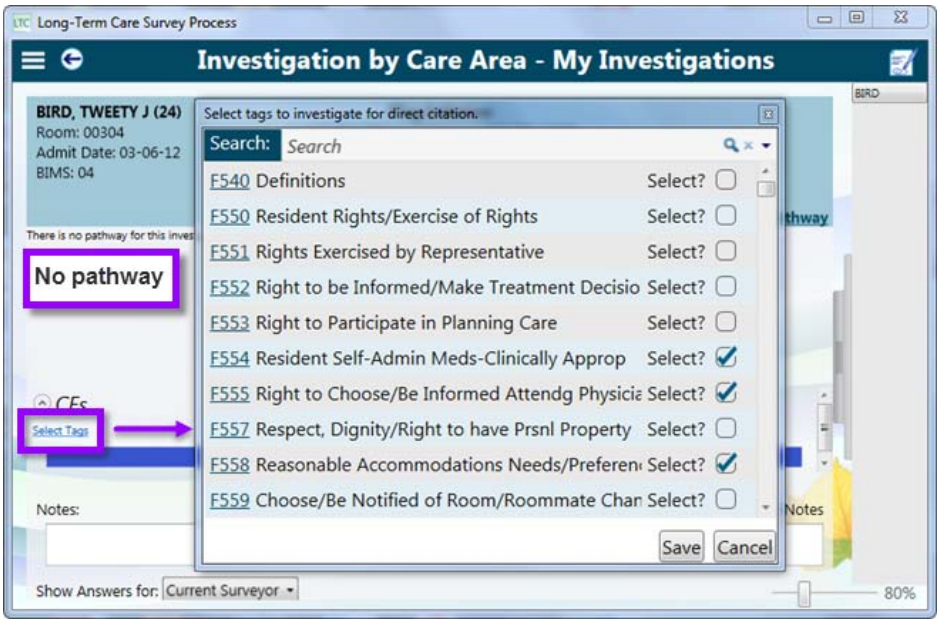


Figure 118: FTag Initiation investigation

3 From the **Select tags to investigate** window, choose applicable tag(s); use the **Search** function if necessary. Click **Save** when done.

4 For each CE, determine compliance based on your observations.

TIP: If guidance is needed, click Tag number to view Regulation Text and Interpretive Guidance.

5 For **In Compliance**, select **Yes**, **No**, or **NA** and select **Severity** if not compliant, as for other investigations.

When the F-Tag Direct Cite investigation is complete (i.e., all CEs are complete whether in compliance or not), it is marked with a green checkmark.

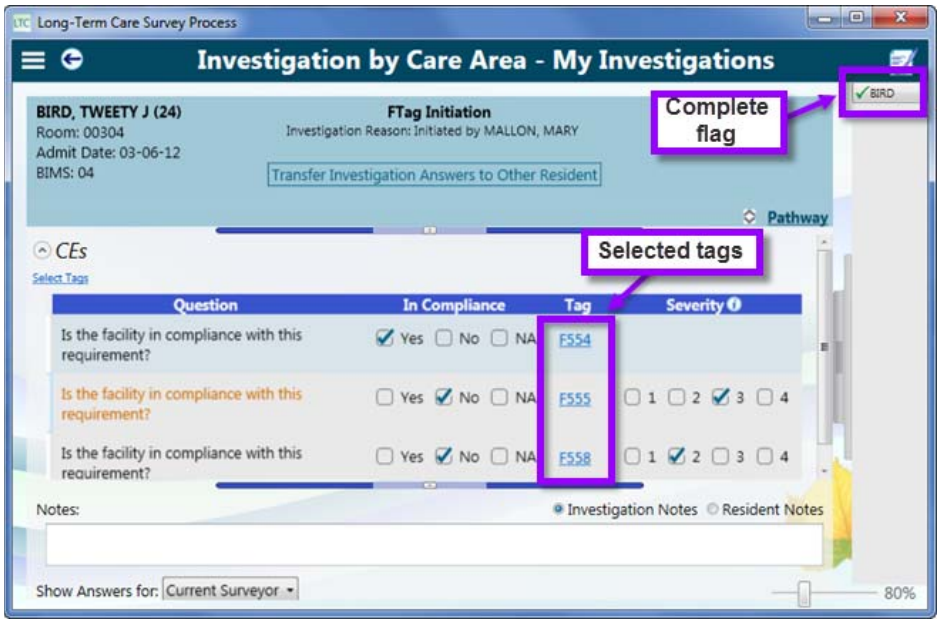


Figure 119: FTag Initiation investigation completed

Note: You can conduct an RRI/family interview during the investigation process using the resident Interview and Observations screen. See "Add an RRI after sample finalization" on page 84 for instructions.

More ...

"Add an RRI after sample finalization" on page 84
"Open the Investigations screen" on page 130

Edit Potential Citation Documentation

You can begin editing your citation documentation before completing the Potential Citations and in preparation for the CMS-2567 while in the field.

Open Edit Potential Citation Doc

Any facility task or investigation you are assigned to and have marked at least one CE No for not in compliance appears in the left pane—you can only edit your own facility task, investigation, or resident notes. Click a task or resident name to see the CEs marked for potential citation and your investigation notes. On this screen you can:

- Review the CE questions that you have marked for potential citation in a facility task or investigation.
- View the tag regulation text and interpretive guidelines.
- Edit the investigation notes for formal documentation (CMS-2567).
- Copy and paste regulation text or interpretive guidelines into your citation documentation.

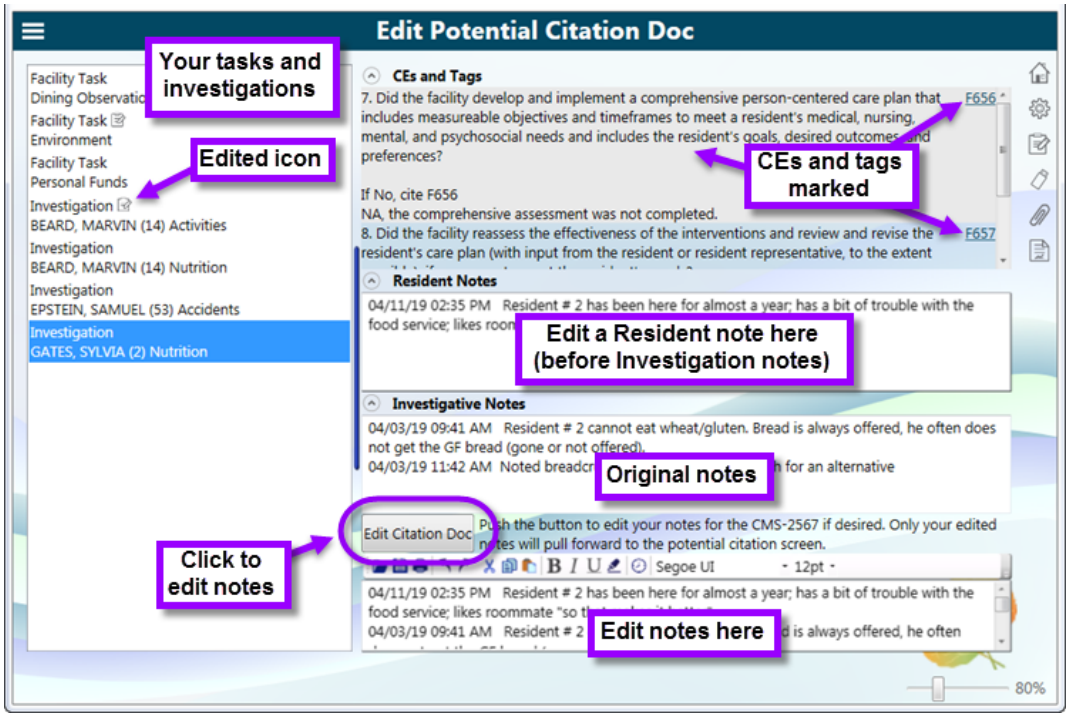


Figure 120: Edit Potential Citation Doc window

To edit potential citation documentation:

1. From the **Navigation** menu, select **Edit Potential Docs**.
2. Select a Facility Task investigation or an Resident Investigation in the left pane.
3. Review the actual CE text and tag information for every CE that you marked for potential citation in that task or investigation. Click the tag number to view the Regulation Text and Interpretive Guidance.
4. Review your investigation notes.
5. You can edit the Resident Notes, but you must do so before clicking the **Edit Citation Doc** button. Click in the **Resident Notes** box to edit.

6 Edit the potential citation documentation:

➥ Click the **Edit Citation Doc** button.

➥ Edit the note as needed. The original note appears in the above panel for your reference.

TIP: You can copy and paste tag text from the Regulation Text/Interpretive Guidance popup.

➥ An edited icon (clipboard) appears next to the investigations once you have edited the documentation.

The edited version of your notes carries forward into Potential Citations and when you load cites into ASE-Q.

Note: Once you have begun editing a note, any changes you make on the actual Investigation or Facility Task screens will not be reflected in potential citations, only the edited version appears.

Potential Citations

When the survey team completes all investigations, they move on to review potential citations. Once data has been shared, all tags from investigations and facility tasks marked as not in compliance carry forward to the Potential Citations screen. Here the team evaluates survey data and determines whether or not to cite each tag. The team coordinator then enters all citation decisions.

Open Potential Citations

Information on the Potential Citations screen is read-only for survey team members. Depending on your role (team member or coordinator) you can:

- View all potential citations marked by surveyors for resident investigations and facility tasks
- View individual tag attributes
- View potential citation detail and documentation for individual tags
- Declare citations (TC only)
- Enter an opening statement (TC only)
- Add citation documentation (TC only)

To open the Potential Citations screen:

1 From the **Navigation** menu, select **Potential Citations**.

The tree on the left lists all tags marked for potential citation from facility task and resident investigations. By default, tags are expanded to display all summary information.

Tag number and title are in bold. Under each tag are two tag attributes.

- Maximum Severity: Highest severity assigned among all potential citations of the tag.
- Status: Cited, Not Cited, Undeclared, or Moved to Tag <number>

Under the tag attributes, the investigative areas and/or facility tasks marked as non-compliant are listed with resident name for an investigative area or "FACILITY" for a facility task plus surveyor and severity for each potential citation of the tag.

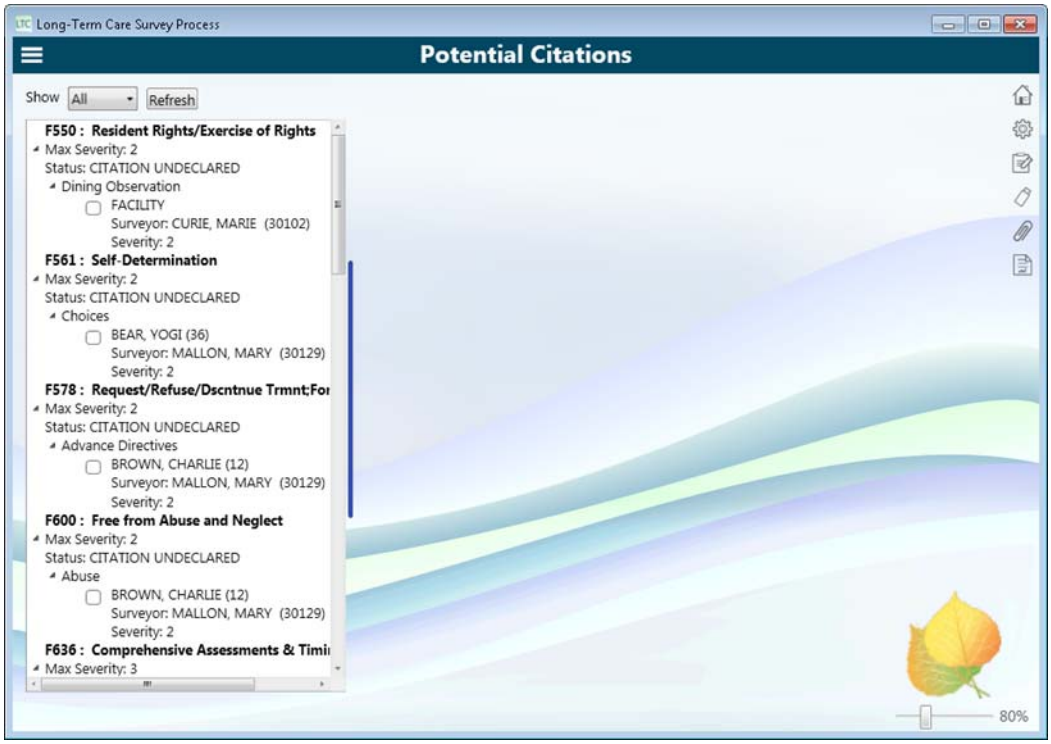


Figure 121: Potential Citations screen

2 Click the triangle next to a section in the tag tree to collapse or expand it. Use scroll bars to see all tags and descriptions.

More ...

"Potential Citations Tips" on page 205

Filter the Tag Tree

You can filter the tag tree by tag status.

To filter the tree:

1. On the **Potential Citations** screen, above the tag tree, select the desired **Show** option:
   - All
   - Cited
   - Not Cited
   - Undeclared
2. If you change the status of a tag, select **Refresh** to update the tag tree.

More ...

"Open Potential Citations" on page 148
"Citation Determination Tips" on page 206

View Potential Citation Information

You can view the citation decision information as well as surveyor notes on the Potential Citations screen.

To view potential citation information for a tag:

➥ On the **Potential Citations** screen, select the tag in the tag tree on the left.

The **Potential Citation Detail for Tag** section on the top right side of the screen displays the citation determination options: Cite or Don't Cite. Below is an **Opening Statement** notepad.

The **Potential Citation Documentation** section on the bottom right side displays surveyor notes (Resident and Investigation) for the resident or facility task. If notes were edited in **Edit Potential Citation Doc**, the edited version appears. Resident notes, listed under the resident name, are

general notes about the resident that may be helpful if the resident is in more than one investigation. Investigation notes, listed under the facility task name, are specific to an investigation involving the resident.

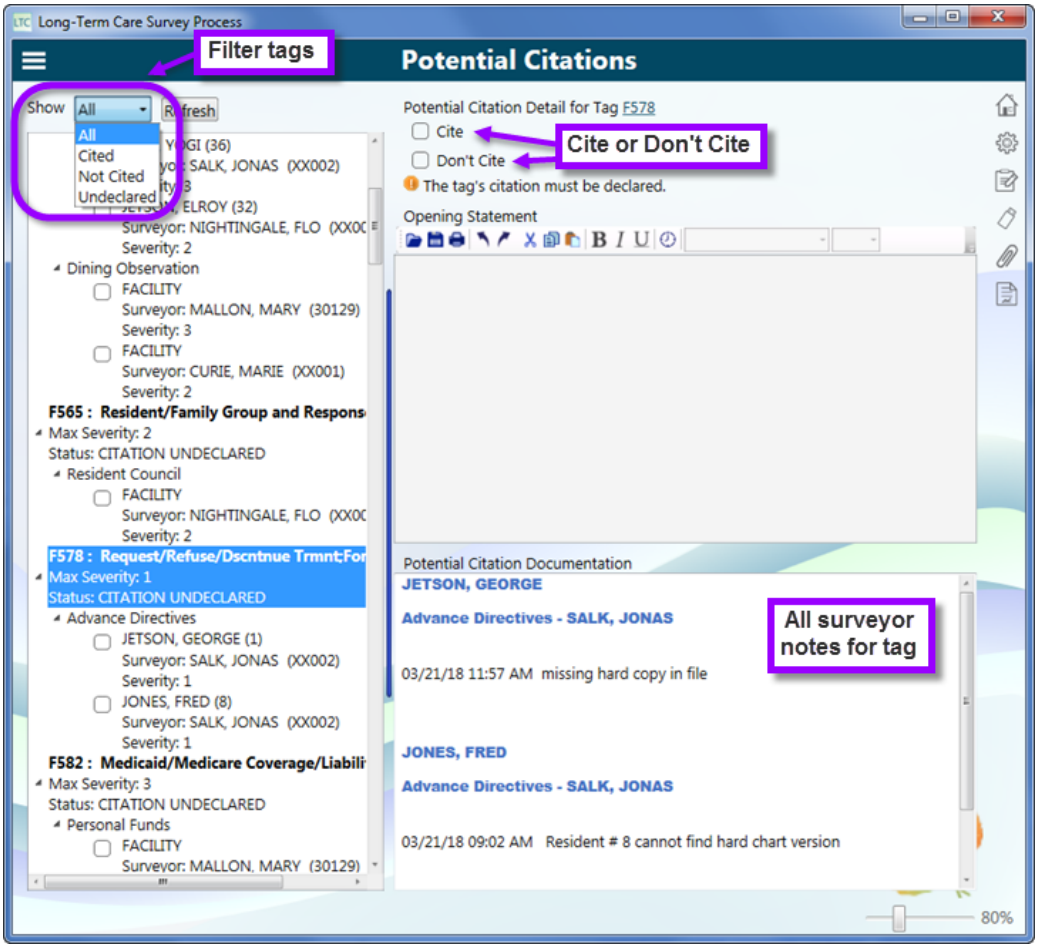


Figure 122: Potential citation information for selected tag

More ...

"Open Potential Citations" on page 148
"Citation Determination Tips" on page 206

Declare Citations

The survey team reviews all the tags marked for potential citation and associated survey documentation to determine which tags to cite. To declare citations once citation decisions are made, the team coordinator selects a cite option (Cite or Don't Cite) for each tag. All tags must be declared cited or not cited.

Cite a Tag

Once the decision to cite a tag has been made, the team coordinator:

- Indicates one or more residents or facility tasks to include in the citation
- Assigns scope/severity S/S level
- Selects at least one citation category

The TC can also add an Opening Statement and additional documentation regarding the citation.

To cite a tag:

1. Open **Potential Citations**.
2. Select the tag in the tag tree.
3. Select **Cite**.

   The following appear:

   - The **S/S** field (grid is collapsed by default)
   - **Citation Categories** options
   - Instructions for completing the citation. As you complete each step, the related instruction disappears.

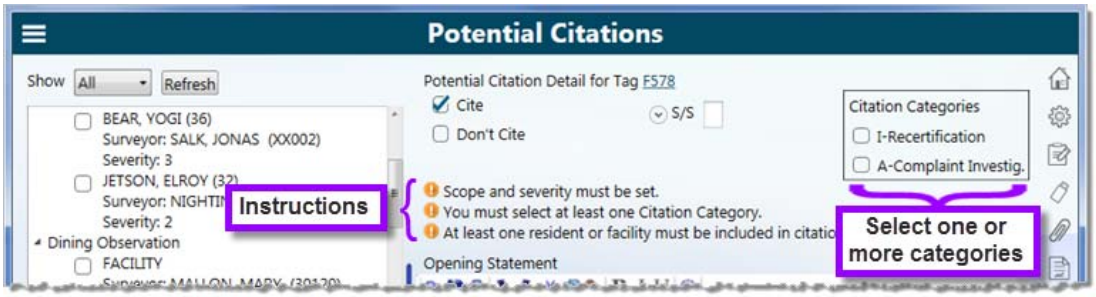


Figure 123: Potential Citations screen

4. Specify **S/S** level. Enter it directly or select it in the grid. Click the arrow to expand or collapse the grid.
5. Select one or more **Citation Categories**.
6. In the tag tree, select at least one resident or facility to include in the citation.

   If multiple residents are listed under a care area or multiple facility tasks are listed for a tag, you may choose not to cite the tag for any of them based on investigation evidence.

When these steps are complete, a green checkmark appears next to the tag number in the tree. Status changes to Cited. You can still make changes if needed.

7 Optionally enter an **Opening Statement**.

8 Repeat this procedure for all tags (potential citations) you are citing.

Citing an SQC Tag

If you cite an SQC (Substandard Quality of Care) tags at a scope/severity level of F, H, I, J, K, or L, a warning appears on the screen. The Extended Survey facility task is triggered and can be accessed from the Facility Task screen (if you decide not to cite the SQC tag, the Extended Survey still remains listed on the Facility Task screen, but you can delete from the facility task list).

You have no later than 14 calendar days after the completion of the standard survey to conduct the extended survey. If the extended survey is completed after the standard survey, documentation of non-compliance should be completed in the same survey shell. Do not upload the survey into ACO until the extended survey is complete (for instructions on uploading a survey, see the "Data Transfer" section in the *ASE-Q Procedures Guide* posted at https://qtso.cms.gov/software/aspen/reference-manuals).

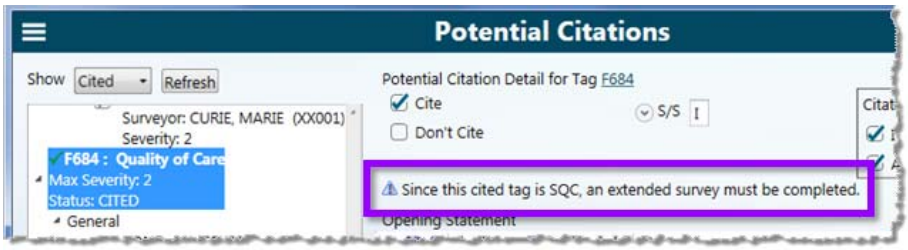


Figure 124: Potential Citation Detail section for an SQC tag

More ...

"Open Potential Citations" on page 148
"Edit Potential Citation Documentation" on page 146
"Citation Determination Tips" on page 206

Don't Cite a Tag

The team may decide that there is not sufficient evidence to pursue a citation. The team coordinator must mark the tag (potential citation) as not cited and specify a reason.

To mark a tag as not cited:

1 Open **Potential Citations**.

2 Select the tag in the tag tree.

3 Select **Don't Cite**.

The Reason Not Cited drop-down list and the instruction to choose a reason are displayed.

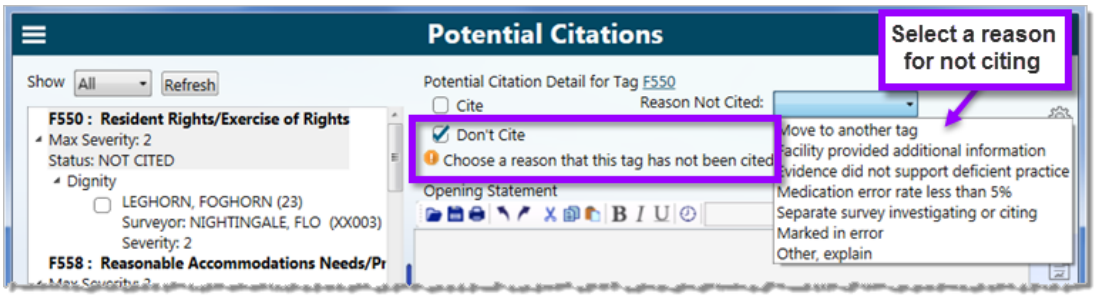


Figure 125: Potential Citation Detail section with Don't Cite marked

4 Choose the applicable **Reason Not Cited** option.

5 If you select **Other**, enter an explanation in the **Other Reason** text box.

If you select **Move to another tag**:

- Click the **Select Tag** button.
- Select the tag you want to move this tag to.
- Click **Save**. Status changes to **Moved to tag Fxxx**.

When these steps are complete, the tag information moves to the tag moved to and listed under the Moved Tags section for that tag.

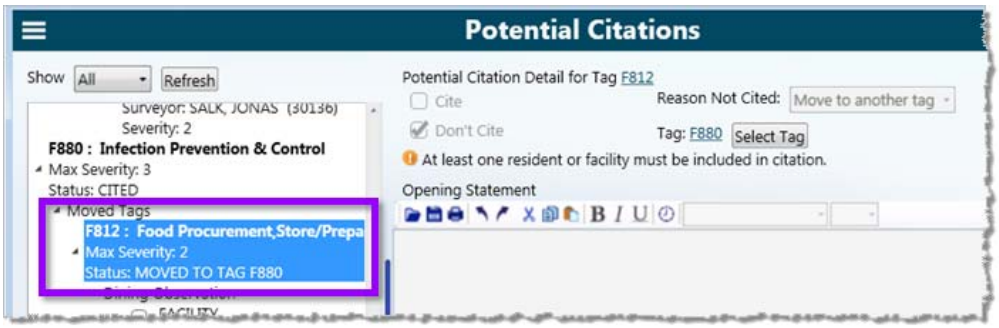


Figure 126: Moved tag in tag tree

6 Optionally enter an **Opening Statement**.

7 Repeat this procedure for all tags (potential citations) you are not citing.

More ...

"Open Potential Citations" on page 148
"Edit Potential Citation Documentation" on page 146
"Citation Determination Tips" on page 206

Modify the Sample List for the Facility

LTCSP automatically adds the following residents to the "Sample List for the Facility" report:

- Residents with an investigation
- Residents added to a facility task by a surveyor
- Residents added to a notes field by using the **Add Resident ID** icon (**Alt** + **R**)—these residents appear on report without having to add them
- Any resident with a checkmark in the **On Report?** column in the Choose Resident dialog.

Add Residents to List

This list can be modified to remove a resident from the list or to include any resident not automatically selected. Any team member can add a resident to the list, but only the team coordinator can remove a resident from the list.

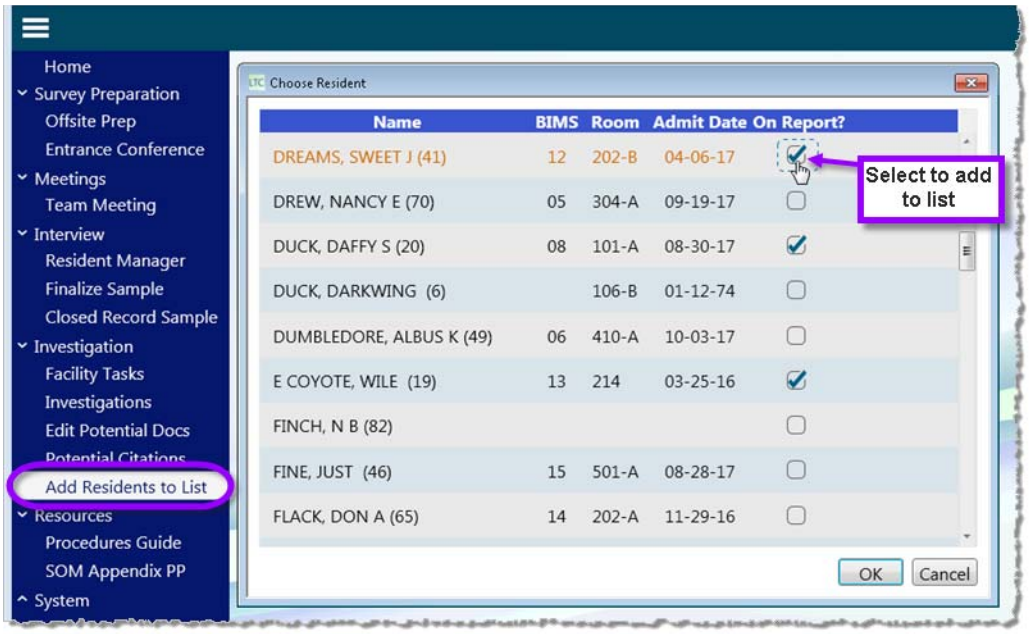


Figure 127: Select residents for the Sample List Provided to the Facility Report

To add residents to the sample list:

1. Select **Add Residents to List** from the **Navigation** menu.
2. In the **On Report?** column, select the checkbox for the resident you wish to add to the report.
3. When finished adding residents, click **OK**.

To remove residents from the sample list (TC only):

1. Select **Add Residents to List** from the **Navigation** menu.
2. In the **On Report?** column, click the checkbox to remove the checkmark for the resident you wish to remove from the report.
3. When finished modifying the list, click **OK**.

Once all modifications to the resident list have been made by all surveyors and you share data, you can print the report for the facility.

More ...

"Generate Reports" on page 33

Load Cites

Once the team coordinator has declared all tags in Potential Citations, you are ready to load cites into ASE-Q. This moves the citations and documentation into the ASPEN database so it is available for producing the CMS-2567.

Load Cites into Citation Manager

To load citations into Citation Manager:

- If not already open, right-click the survey you are working on in ASE-Q and select **Citation Manager**.
- Click **Load Cites**.

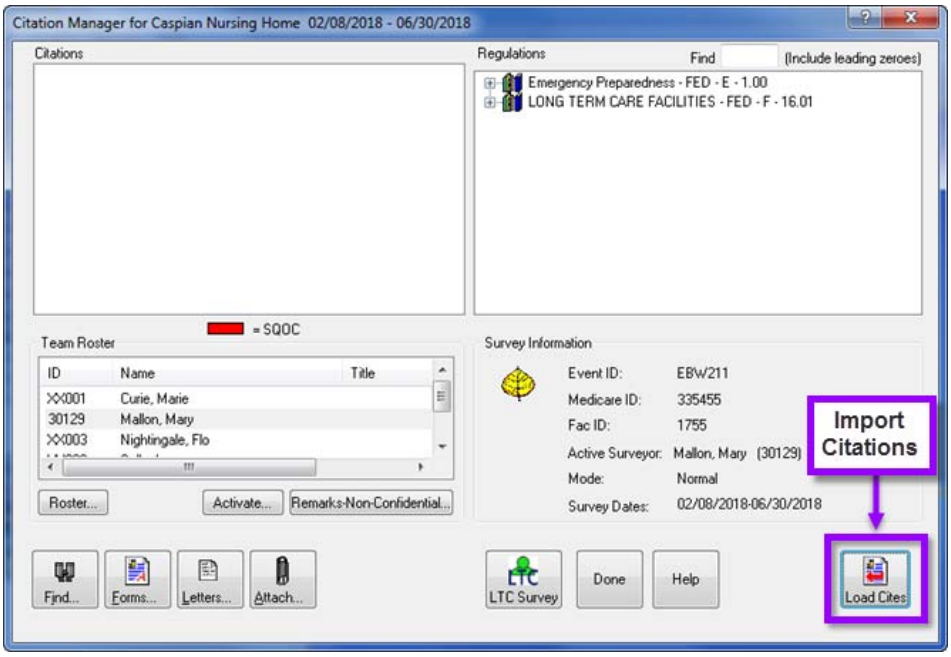


Figure 128: Load cites into ASE-Q

Validation Issues

When you select Load Cites in ASE-Q, the system checks the data and displays a message if any issues with the tags are detected (e.g., citation decisions not made, incomplete citation decisions such as forgetting to mark S/S level or citation category). The system does not allow you to load citations into ASE-Q until all tags have been cited or not cited and assigned a category. You will have to return to the Potential Citations screen to resolve any issues.

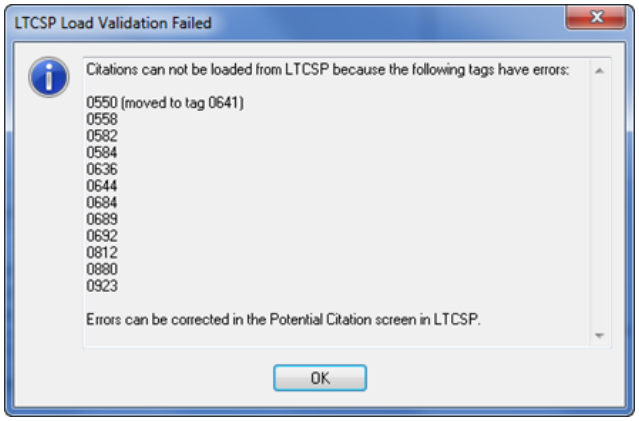


Figure 129: Possible errors when loading cites into ASE-Q

If you revise tags in LTCSP and need to load the revised tags into the Citation Manager, you must first delete the tags from the Citation Manager—only tags not listed in the Citation Manager will load from LTCSP. Therefore, you cannot overwrite edits made in the Citation Manager for any other tags when you re-load tags revised in LTCSP.

If you do have SQC tags cited when you load cites but have not completed the Extended Survey, you will receive a message that the Extended Survey has not been completed. You can choose whether or not you want to upload the citations into ASE-Q at this time or load when you've completed the Extended Survey.

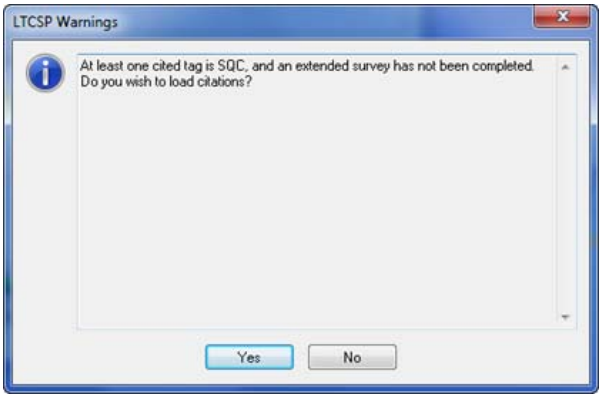


Figure 130: Warning message when an SQC tag is cited but no Extended Survey

Extended Survey for SQC Citation

For surveys with SQC tags with the appropriate scope and severity, it is necessary to conduct an extended survey. When an SQC tag has been cited in Potential Citations with the appropriate scope and severity, the Extended Survey facility task is automatically triggered.

A note appears in the Potential Citation Detail when you select Cite for an SQC tag reminding you that an extended survey must be completed.

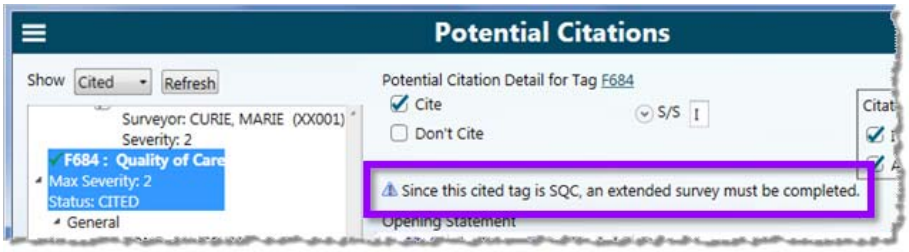


Figure 131: Reminder message to conduct extended survey for an SQC tag

To open the extended survey:

1. Open the survey in LTCSP and select **Facility Tasks** from the **Navigation** menu.
2. Assign team members to the Extended Survey task.
3. Click **Extended Survey** to open and follow Use and Instructions to conduct the survey.

If Extended Survey was removed:

➥ Click the **Add Facility Task** icon.

Select **Extended Survey** from the drop-down list and click **Save**.

➥ Follow steps 2 and 3 above.

More ...

"Facility Tasks" on page 109

Generate Survey Documentation Reports in ACO

Once your completed survey has been uploaded into ACO, you can generate survey documentation reports containing all data from the survey from within ACO. You can generate documentation reports for these areas:

- Surveyor Notes
- Team Meeting Notes
- Initial Pool Data
- Resident Investigation Data
- Facility Task Data
- Potential Citation Data

More ...

For more information on generating Survey Documentation Reports in ACO, refer to the ACO Procedures Guide posted at https://qtso.cms.gov/software/aspen/reference-manuals.

LTCSP Comparative Survey Procedures for ROs

LTCSP Comparative Surveys

When a Regional Office (RO) team needs to conduct an LTCSP Comparative survey, the team coordinator or supervisor must create the LTCSP Comparative survey in ARO and link it to the State Agency (SA) survey using FMS Tracking.

For details on conducting the LTCSP Comparative survey, the ROs have the *LTCSP Comparative Procedure Guide* available in the software (**Navigation** menu | **Resources** | **RO Procedures Guide**).

Note: The term Team Leader appears in the application. This represents the same roles/responsibilities as Team Coordinator.

Create the LTCSP Comparative Survey Shell in ARO

Once the RO team has identified the SA survey you will use for the LTCSP Comparative, you can create your LTCSP Comparative survey shell in ARO.

To create an LTCSP Comparative survey shell in ARO:

1 From the **Tracking** menu, select **FMS Tracking**.

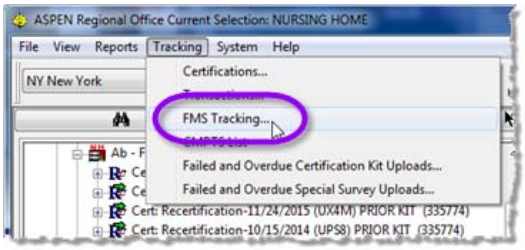


Figure 132: FMS Tracking menu in ARO

2 In the **FMS Tracking** window, click **Add** to select the provider:

➥ Enter the CCN (provider number),

-or-

Click **Find** to locate the provider; click the provider in **Search Results** to automatically enter the CNN.

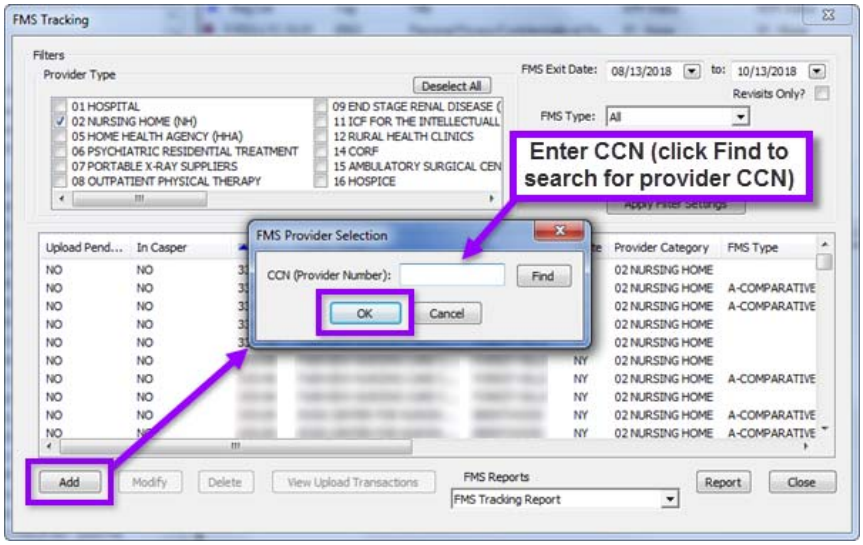


Figure 133: FMS Tracking window in ARO

- ➥ Click **OK**.
- ➥ Click **Yes** in the **Confirm Provider** dialog. The **FMS Add / Update** window opens.

3 In the **FMS Add / Update** window, link the LTCSP Comparative survey to the SA survey:

- ➥ Select **A Comparative** for the **Type of Federal Survey**.
- ➥ Select the appropriate **Extent of Federal (FMS) Survey**.
- ➥ Click **Select** in the **State Agency Survey** section. The **Select Related State Survey** window opens.
- ➥ Select the applicable state agency survey. Click **OK**.

The selected survey information appears in the State Agency Survey section.

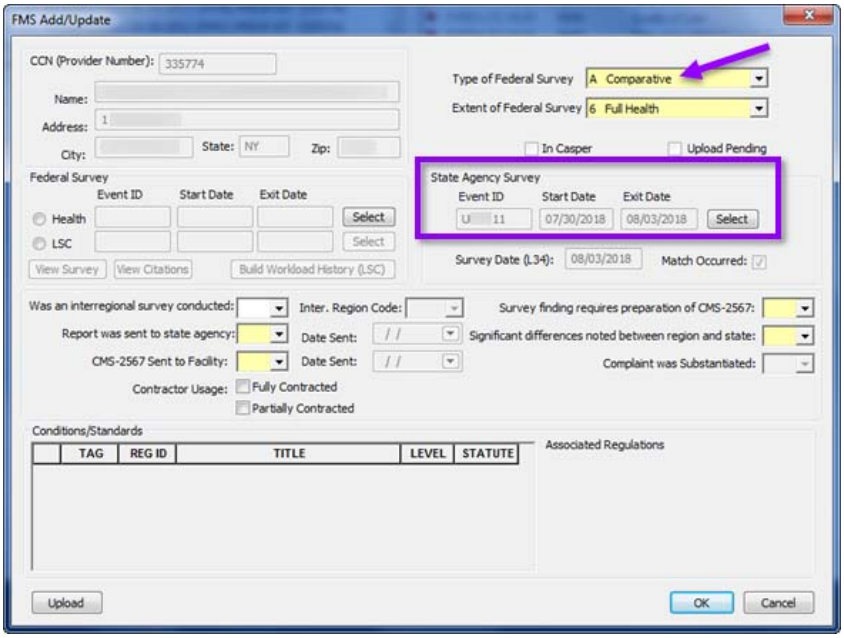


Figure 134: ARO FMS Add/Update window

Note: If the state's LTCSP survey is not complete, you will receive an error that the FMS survey cannot be created until the state imports the completed survey into ACO. If you receive this message, you cannot complete the comparative until you follow up with the state to ensure they import the completed survey back into ACO. Once they have done that, you will need to use the FMS Tracking to link the state survey to your LTCSP Comparative again. Alternatively, select another survey for the comparative.

4 Create the LTCSP Comparative survey shell:

➥ In the **Federal Survey** section, select **Health** and click **Select**.

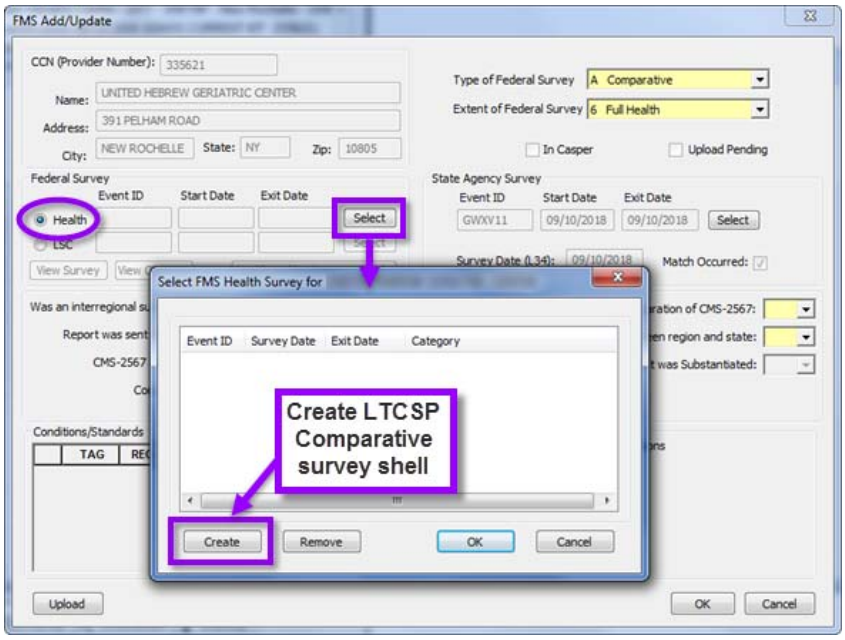


Figure 135: Create an LTCSP Comparative survey from FMS Add/Update

➥ If listed, select the LTCSP Comparative survey or

- Click **Create** to create a new LTCSP Comparative survey shell. The **Create Survey** window opens.
- Enter the LTCSP Comparative survey Start and Exit dates; select the Federal regulation set, and enter survey team members, if known.
- Click **OK**.

Note: The system automatically sets the LTCSP Comparative survey to the same regulation set used in the state survey.

➥ Click **OK**, in the **FMS Health Survey for** dialog. The LTCSP Comparative information appears in the **Federal Survey** section.

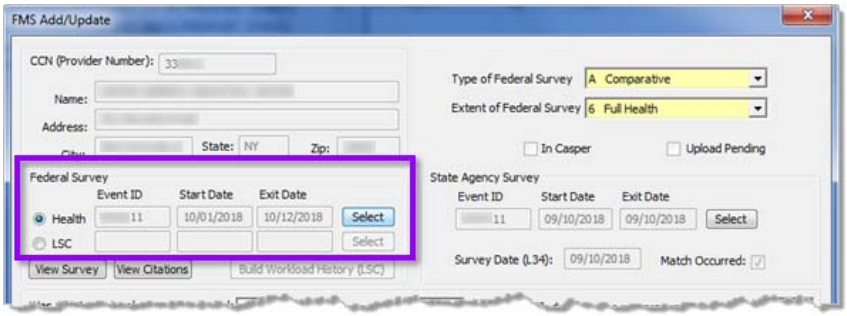


Figure 136: FMS Add/Update with LTCSP Comparative survey listed

5 Click **OK** in the **FMS ADD / Update** dialog.

6 Click **Close** in the **FMS Tracking** window.

More ...
For more information on creating FMS comparative surveys, refer to the *ACO Procedures Guide*, posted on the QTSO website at https://qtso.cms.gov/software/aspen/reference-manuals.

Transfer LTCSP Comparative Surveys to ASE-Q

From ARO, the RO team coordinator (TC) can export the LTCSP Comparative survey and the SA survey as one export file in an encrypted format to a transfer location. Export the shell according to your region's practice (e.g., flash drive or via Direct Connect). Surveyors then import the contents of the export transfer file into ASE-Q.

Note: The survey shell should be exported from ARO as close to the survey start data as possible and no more than 5 business days before the survey start date.

Export the LTCSP Comparative and State Surveys

To export an LTCSP Comparative survey shell from ARO:

1 In **ARO**, locate and select the LTCSP Comparative survey in the **Tree** or **List** view.

2 Drag it to the **Export** button in the toolbar.

3 In the **Export** window, indicate your **Export To** location according to your regional practices.

- Aspen Transfer Location–Select the applicable location.
- Other Zip File Location–Enter the path to the transfer file or navigate to it using the binoculars.

4 Click **OK** in the **Export** window.

5 In the **Survey Export** window, select the survey(s) you want to send to the transfer destination. **Include related LTCSP Surveys** is selected by default.

TIP: Even if you just select the LTCSP Comparative survey, both surveys will be imported. You must have the state survey to use LTCSP for the LTCSP Comparative survey.

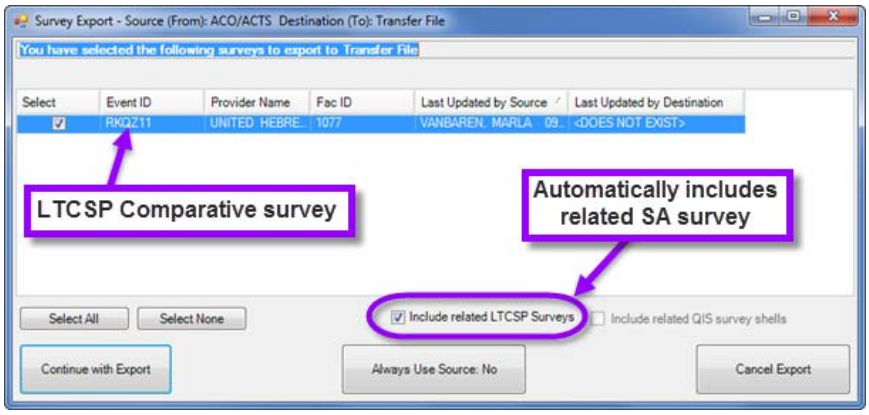


Figure 137: ARO Survey Export window with an LTCSP Comparative survey

6 Click **Continue with Export**. The **Transfer Progress** window shows that 1 of 2 surveys is being exported.

7 Click **OK** in the **LTC Survey Process Transfer** dialog.

8 Click **OK** in the **LTC Survey Process Calculations** dialog.

9 In the **Finalize Transfer** window, select **Apply** to complete the export process for the first survey.

10 The second survey exports next, again click **OK** in the **LTC Survey Process Transfer window**, and click **Apply** in the **Finalize Transfer** window.

Import the LTCSP Comparative and State Surveys

To import an LTCSP Comparative survey into ASE-Q:

1 On the **ASE-Q** toolbar, click **Import**.

2 In the **Import Type** section, select **Surveys** if not selected.

3 Select the appropriate **Import From** option to indicate the location of the transfer file:

- ASPEN Transfer Location–Select the applicable location.
- Other Zip File Location–Enter the path to the transfer file or navigate to the zip file location.
- Locate ASE Database–Use option for wired or wireless ASE-Q to ASE-Q network transfers. Enter database name or IP address.

4 In the **Select Survey(s) to Import** window, select the LTCSP Comparative survey you want to import. **Include related LTCSP Surveys** is selected by default.

TIP: Even if you just select the LTCSP Comparative survey, both surveys will be exported. You must have the state survey to use LTCSP for the LTCSP Comparative survey.

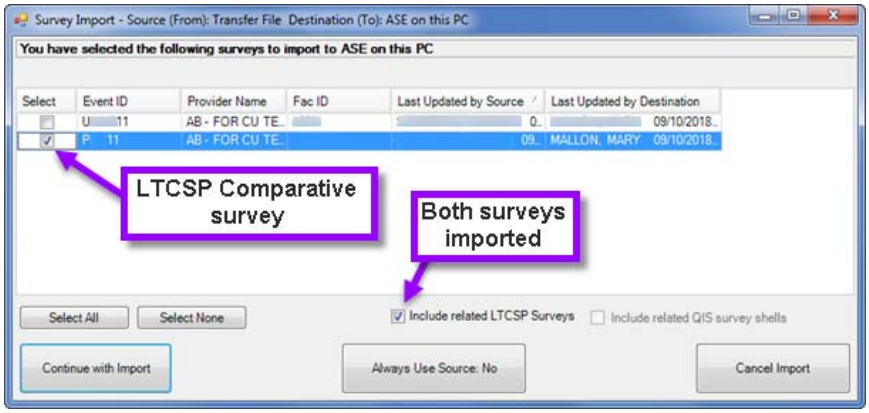


Figure 138: ASE-Q Survey Import window listing both SA and LTCSP Comparative surveys

5 Click **Continue with Import**.

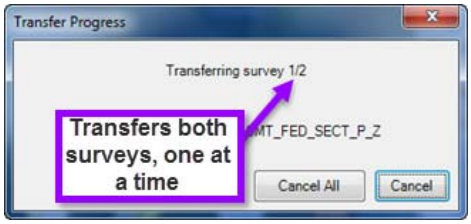


Figure 139: Transfer Progress dialog showing two surveys will be transferred

6 Click **OK** in the **LTCSP Survey Process Information** window.

7 Click **OK** in the **LTC Survey Process Transfer** window.

8 Click **Apply** to finalize the transfer.

9 The second survey imports next. Once again, click **OK** in the **LTC Survey Process Transfer** window, click **Apply** to finalize the second transfer.

More ...

For detailed information on transferring surveys from ACO to ASE-Q, refer to the *ACO Procedures Guide* and *ASE-Q Procedures Guide*, which are posted at https://qtso.cms.gov/software/aspen/reference-manuals.

Open an LTCSP Comparative Survey in LTCSP

Open the comparative survey in LTCSP through ASE-Q, either directly in Tree view or through the Citation Manager. All team members must be on the survey team and have Assessment access to access the comparative survey.

To open LTCSP from Tree view:

1. Open **ASE-Q**.
2. In **Tree view**, expand the facility node (+) to locate the LTCSP Comparative survey. Both the state and comparative surveys appear in the tree.
3. Right-click the LTCSP Comparative survey event ID and select **LTCSP**.

   The LTCSP application opens for the selected survey.

To open the LTCSP Comparative from Citation Manager:

1. Open **ASE-Q**.
2. In **Tree view**, expand the facility node (+) to locate the LTCSP Comparative survey.
3. Right-click the LTCSP Comparative survey event ID and select **Citation Manager**.
4. Click the **LTC Survey** button to open the survey.

   The LTCSP application opens for the survey.

LTCSP for LTCSP Comparative Surveys

To conduct an LTCSP Comparative survey using LTCSP, the RO team uses the software much like an SA would for a regular survey. With an LTCSP Comparative, however, ROs have information from the SA survey that will be displayed in the LTCSP Comparative survey to help you conduct the comparative.

Data Transferred from the State Survey

The system pulls select information from the state survey into the LTCSP Comparative survey including

- The entire resident list—resident IDs as well as MDS indicators, room numbers, BIMS, and admission dates

  Any residents discharged on the latest assessments will be marked as discharged. The resident will still be identified as an SA resident; however, the resident will have a checkmark in the discharge box.
- Those residents included in the SA initial pool
- Any new admissions or other residents added by the SA team

- Resident representative interviews conducted by state with any available contact information
- Offsite Prep information
- Complaint/FRI information, if a complaint survey
- The following subgroups set by the SA team will be identified with the same subgroups:
  - Offsite selected
  - New Admission
  - Complaint
  - FRI
- The final Closed Record Residents are copied forward to the Investigation screen. There is no Closed Record screen for RO Comparative surveys.
- The five Unnecessary Meds residents
- The final facility census number
- Residents marked for a resident assessment over 120 days in the SA survey
- The residents included in the SA survey display, regardless of discharge status, in the following facility tasks:
  - Beneficiary Notice
  - Dining (MDS residents only)
  - Infection Control
  - Resident Council
- The sample and comparison for areas marked for further investigation from the SA survey

Data not transferred from the SA survey

Certain information from the SA survey will not be available in the LTCSP Comparative including

- SA surveyor assignments
- Attachments associated with the state survey shell (these are not transferred to ASE-Q)
- Tags cited by the SA team
- Two SA subgroups (Vulnerable and Identified Concern)

Offsite Preparation

The LTCSP Comparative Offsite Prep screen is substantially different from the LTCSP Standard survey screen used by states. The Offsite Prep screen provides almost all the information entered by the SA team coordinator. The RO TC only needs to answer a few questions and they can enter the team unit assignments as normal. All data transferred from the SA survey is read only, except for the Complaint/FRI data where the RO TC can make changes and assign RO surveyors.

Read-only information from the SA survey includes

- Facility and Administrator name
- SA survey event ID and date
- LTCSP survey event ID
- CASPER 3 review comments
- Results from last Standard Survey
- Abuse response data
- Any Federal Waivers/Variances
- Active enforcement case information
- Ombudsman contact information and concerns

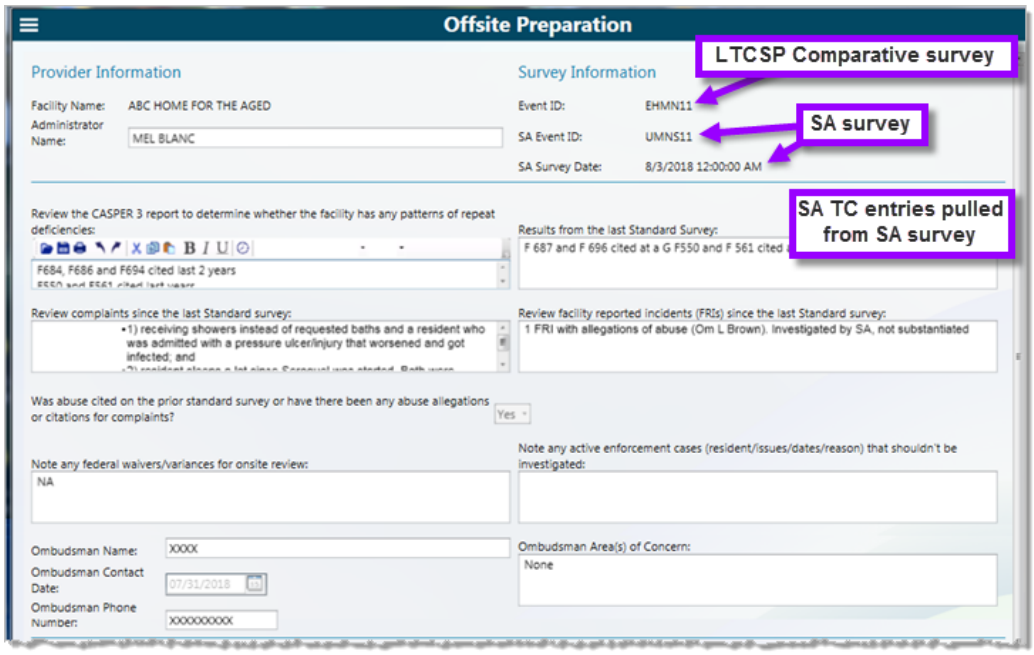


Figure 140: Offsite Preparation screen with SA survey information

The system pulls other information from the SA survey and based on some of this information, the RO TC has some questions to answer. The system-generated information includes

- SA initial pool and Complaint/FRI information
- SA Facility census number, survey team size, and initial pool size including
  - Target initial pool size
  - Actual initial pool size
  - Recommended survey team size
  - Actual survey team size
- A place to comment on SA team size and initial pool
- Any SA residents that were on transmission-based precautions (TBP) with an option to verify this and find the resident from the resident list

Review the SA survey information and answer the questions.

To answer SA survey-related questions:

1. Click the drop-down next to the question **Is there a concern with the size of the SA's Initial Pool?** Select **Yes** or **No**.
2. Enter any notes in the notes box if you select **Yes**.
3. The system pulls any transmission-based precaution (TBP) residents from the SA survey team meeting screen. Click the drop-down to answer **Yes** or **No** for whether any TBP residents were included.

4 From the resident drop-down list, select the TBP resident name to link the SA's TBP resident to the LTCSP Comparative survey.

TIP: When you select the TBP resident, the information is added to the Team Meeting screen.

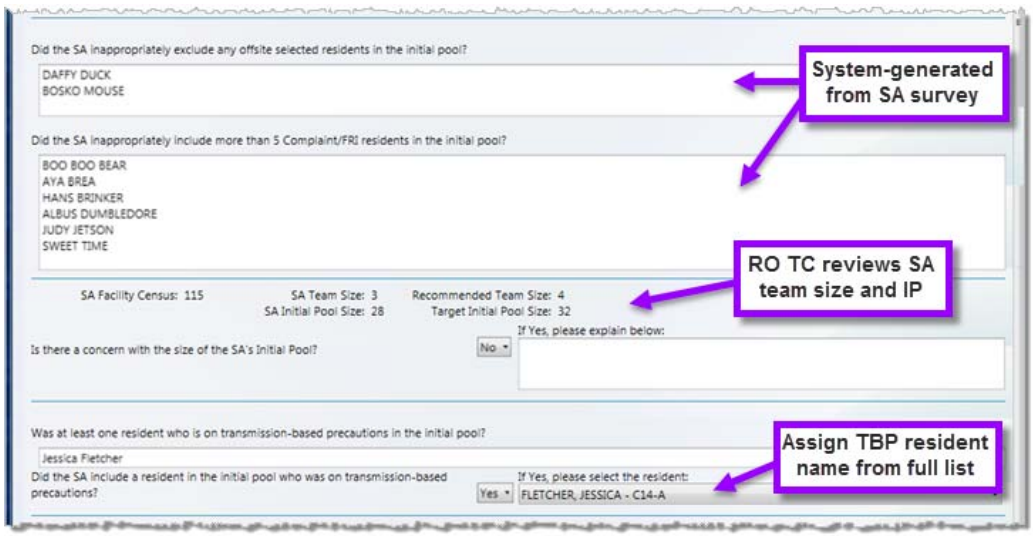


Figure 141: Offsite Prep screen system-generated information and RO questions

Complaint/FRIs in the LTCSP Comparative have all the information initially pulled from ACTS, the resident names, the SA added LTCSP resident areas, and inclusion in the initial pool checkmark for each complaint/FRI. The SA team assignments do not carry over, but the RO TC can make initial pool assignments here. The RO TC can also add or remove any of the LTCSP areas.

As with the LTCSP Standard survey, the RO TC can provide the team member area assignments in the Team unit assignments section (use last year's floor plan).

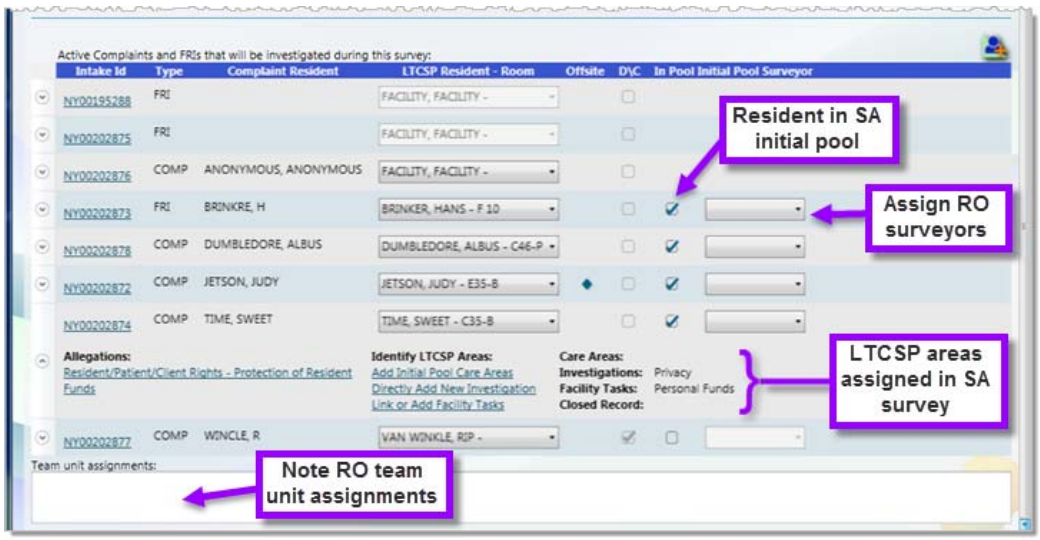


Figure 142: Offsite Prep screen with SA survey complaint/FRI information

If you disagree with the state's information, you should update the information so it represents what you think the state should have investigated or if the SA failed to link the complaints to the LTCSP survey. You should follow the steps outlined in the LTCSP Comparative Procedures Guide to link complaints to the LTCSP Comparative survey (**Navigation** menu | **Resources** | **RO Procedures Guide**).

If a complaint resident does not have a care area assigned but does have an investigation, the investigation automatically appears on the Inv4estigations screen without a surveyor assignment. It's a good idea to verify that these complaint investigations appear on the screen.

1. Select **Investigations** from the **Navigation** menu.
2. Change the filter to **All Investigations**. Complaint investigations along with SA Closed Record Review candidates are listed.
3. You can assign the investigations to the survey team now or wait until after finalizing the sample.

More ...

"Offsite Preparation" on page 48
"Active Complaint and FRI data" on page 50

Resident Manager

The Resident Manager screens provide additional information for the LTCSP Comparative surveys. The default view display those residents included in the SA's initial pool. Residents with the subgroups of Offsite selected, New Admissions, Complaint, and FRI in the SA survey will also have these subgroups assigned in the LTCSP Comparative. Residents in the SA initial pool are marked SA.

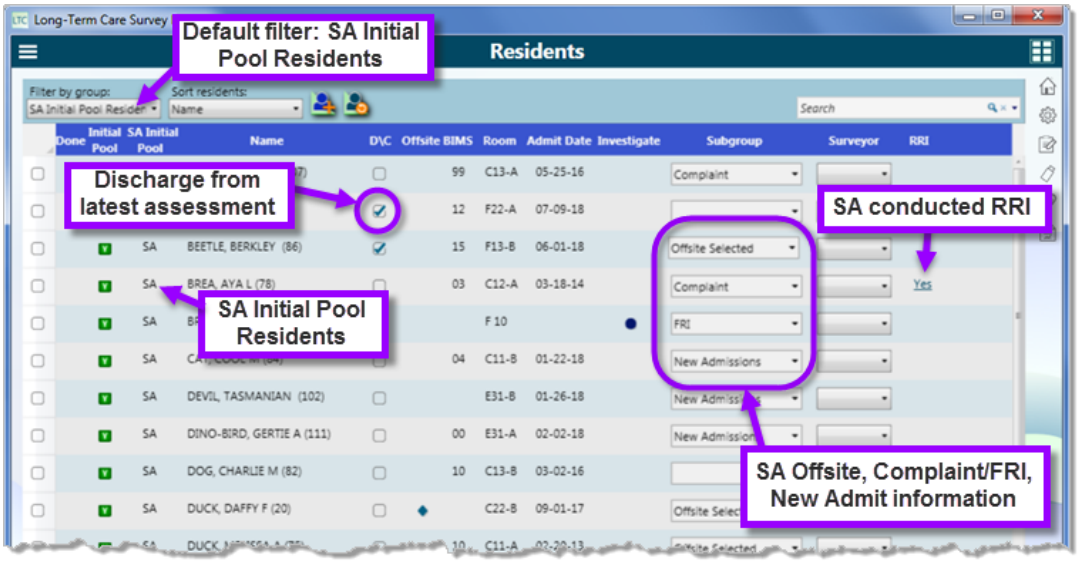


Figure 143: Resident Manager screen with LTCSP Comparative information

The Card view has the same information, but the SA label appears before the resident name.

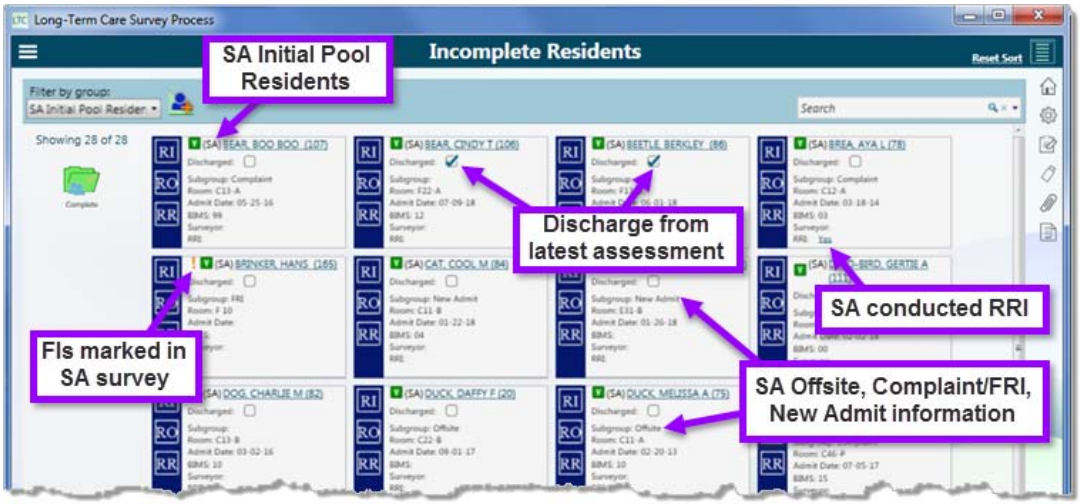


Figure 144: Resident Manager Card view with LTCSP Comparative information

If an SA marked a resident for dialysis, smoking, vent, hospice, and/or transmission-based precaution, the Initial Pool popup (click the IP indicator to open) shows this information.

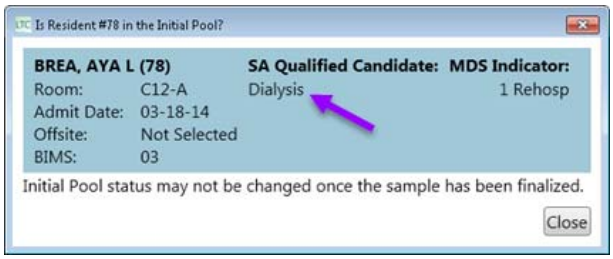


Figure 145: Example of SA Qualified Candidate for dialysis

More ...

"Resident Manager" on page 57
"Open the Resident Manager" on page 58
"Add a New Admission" on page 68
"Assign Subgroup to Resident" on page 70
"Assign Surveyor to Resident" on page 71
"Resident Manager Tips" on page 197

Interview, Observations, and Record Review

When an RO interviews an SA resident or a resident added to the initial pool that the RO indicates was missed by the SA, the process is the same as with any SA survey with the addition of a special question when an RO selects Further Investigation (FI). The question asks whether or not the condition existed when the state conducted their survey along with the date of the SA survey. The care area (CA) will not be marked with the orange exclamation point until you answer the question, **Yes** or **No**. If you select Yes and the SA did NOT mark this CA as Further Investigation, **Missed FI** appears on the Finalize Sample, Investigation, and Potential Citation screens.

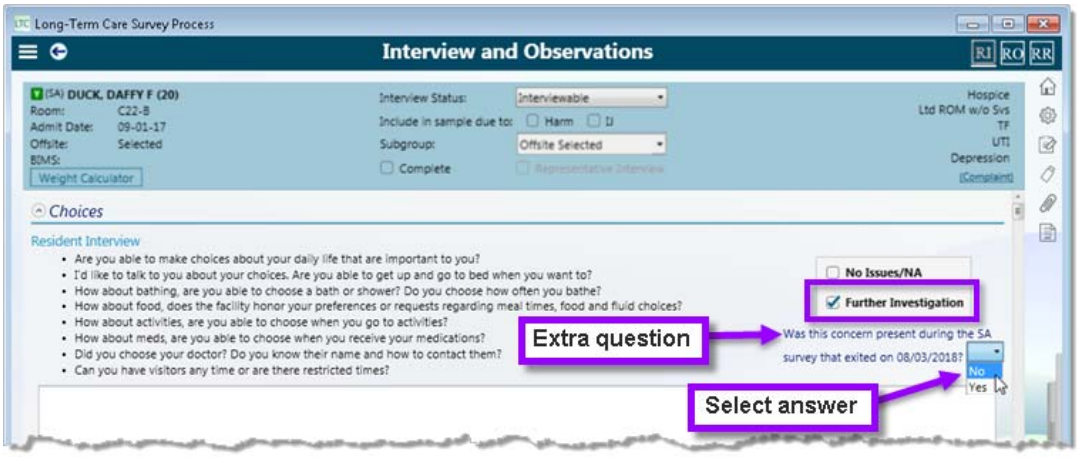


Figure 146: Example of an LTCSP Comparative extra question

If the SA conducted a resident representative interview, **Yes** appears in the **RRI** column in resident manager (the bottom of a resident card in Card view).

➥ Click **Yes** to see the RRI contact information, if available, from the SA survey.

If the RO selects Non-Interviewable for the Interview Status, the RRI contact information from the SA survey displays appears if they entered any information int he RRI Contact Information field.

If the RO determines the resident is interviewable, the RRI information will disappear once the RO selects Interviewable.

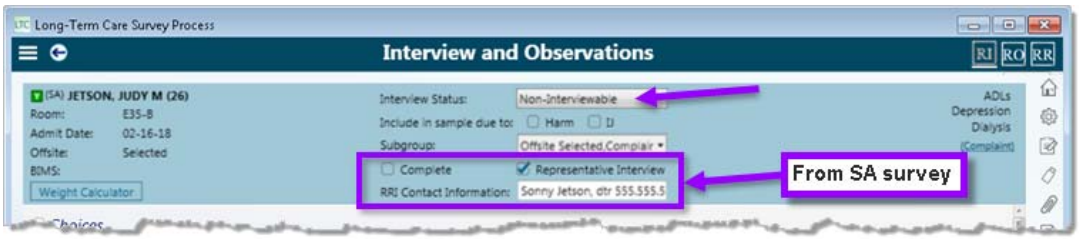


Figure 147: RRI information from SA survey showing in LTCSP Comparative

If you decide to interview a resident not in the SA initial pool, you will need to add them to your initial pool.

To add a resident not in the SA initial pool:

1. Find the resident in the Resident Manager (either change filter to **All Residents** or use Search).
2. Then change the IP indicator to **Yes**.
   - ➥ Click the IP indicator icon. Click the **Yes** button.
   - ➥ You will get a popup asking if the SA should have included this resident in their initial pool. Answer **Yes** (with rationale) or **No**.

     Note: If you answer Yes, **SA Missed** appears in the **Missed Resident?** column on the Finalize Sample screen.

   - ➥ You will automatically be assigned as surveyor.

Figure 148: Select an answer when adding a resident not in SA IP

More ...

"Interview, Observations, and Record Review for Initial Pool Residents" on page 76
"Care Areas" on page 77
"Interview and Observations Tips" on page 200

Team Meeting

The Team Meeting screen is available only to the RO TC. In an LTCSP Comparative survey, the questions are different and include SA survey information. The system pulls data from the SA survey as well as from the LTCSP Comparative team members (after data share) for Day 1 and Day 2 or later.

Team Meeting Day 1

Most of the information on Day 1 is pulled from the system and is updated with all surveyor information after data sharing. The third question looks at the dialysis, hospice, smoking, ventilator, and TBP residents and compares whether the SA's initial pool residents were included in the RO's initial pool.

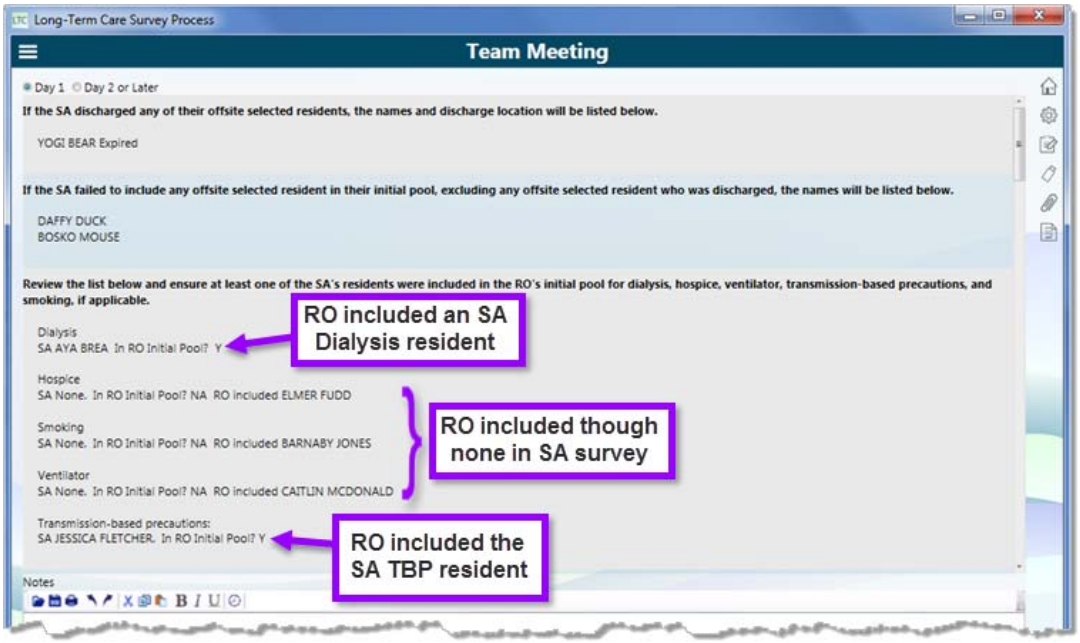


Figure 149: Team Meeting screen in an LTCSP Comparative - Day 1

Day 1 Questions and Response Explanations

Below lists the questions and where any system generated answers come from for Team Meeting Day 1:

If the SA discharged any of their offsite selected residents, the names and discharge location will be listed below.

System generated list of discharged offsite selected residents from the SA survey and their discharge location

If the SA failed to include any offsite selected resident in their initial pool, excluding any offsite selected resident who was discharged, the names will be listed below.

System generated list of offsite selected residents from the SA surveys that were not discharged and not assigned to a surveyor

Review the list below and ensure at least one of the SA's residents were included in the RO's initial pool for dialysis, hospice, ventilator, transmission-based precautions, and smoking, if applicable.

System generated list of the SA residents for the care areas Dialysis, Hospice, Smoking and Ventilator. For each care area the system will list the residents from the SA survey that were:

1. Investigated for the care area
2. If no resident were investigated, residents with an FI will be listed
3. If no residents were investigated or had an FI, residents with NI will be listed

The system will also indicate if the SA resident was included in the RO initial pool.

The TBP resident identified on the RO's offsite prep screen will also be listed.

Confirm the residents listed are in the RO's initial pool. If a resident is listed who shouldn't be in the initial pool, change the IP indicator to No or unassign your name from the resident on the Resident Manager screen. For any unassigned resident who was also in the SA's initial pool, you must complete any unassigned resident or discharge them.

System generated list of all the residents in the RO initial pool and indicates the assigned surveyor and whether the resident was also in the SA initial pool.

How much work does each RO surveyor have left to do?

System generated list of residents with incomplete initial pool data organized by surveyor and by interview, observation or record review.

Any harm or IJ concerns for the RO team?

System generated list of residents marked as either Harm or IJ during the initial pool process. Information includes assigned surveyor.

Display number of SA and RO completed RRI/family interviews.

System generated list of residents where a Resident Representative Interview was completed. The list is separated by SA and RO teams and includes the assigned surveyor.

If the SA did not complete at least three RRI/family interviews, was it feasible for the SA to have completed at least three RRI/family interviews (e.g., the RO team was able to complete the minimum with interviewees who visit daily)?

TC will enter a response to this question on the team meeting screen.

What is the status and pertinent information for complaint and FRI residents?

TC will enter a response to this question on the team meeting screen.

Team Meeting Day 2 or Later

The Day 2 or Later screen continues to show any resident interviews, observations, or record reviews left undone. Here you will be asked to input more information regarding the progress of the survey and about the SA survey. Once the facility tasks and investigations begin, the system will also answer the question **Are there any harm or IJ concerns?**—any CE marked with a severity of 3 or 4 for any resident or the facility appears here (after data share).

Figure 150: Team Meeting screen in an LTCSP Comparative Day 2 or later

Day 2 or Later Questions and Response Explanations

Below lists the questions and where any system generated answers come from for Team Meeting Day 2 or Later:

Did the SA include complaints/FRIs in the sample appropriately (e.g., no more than 5 residents)? Yes, No. If not, explain.

TC will enter a response to this question on the team meeting screen.

Did the SA appropriately include residents in the sample to cover abuse, dialysis, hospice, ventilator, and transmission-based precautions, as appropriate? Yes, No.

System generated list of residents that had NI or FI marked for Abuse, Dialysis, Hospice or Ventilator on the SA survey and the associated care area was not investigated.

Also includes the TBP resident entered on the RO offsite prep screen if that resident was not investigated on the SA survey.

Based on the initial pool concerns identified by the SA, should the SA have included any other residents in the sample excluding the areas covered above for dialysis, hospice, etc.? Yes, No. If so, explain

System generated list of Care Areas where one or more residents was marked as FI during the SA's initial pool process but the area was not investigated by the SA team.

Are there newly identified harm or IJ concerns?

System generated list of residents that were investigated and the facility was found to not be in compliance for one or more critical elements where the severity was a 3 or 4.

Does the sample need to be expanded to rule out SQC?

TC will enter a response to this question on the team meeting screen.

What is the status and pertinent information for complaint and FRI residents?

TC will enter a response to this question on the team meeting screen.

What pertinent finds does each surveyor have (ensure you review and address all prior reported concerns)?

TC will enter a response to this question on the team meeting screen.

How much work does each surveyor have left to complete?

System generated list of incomplete investigations by resident and investigative area with surveyor and a list of incomplete facility tasks.

Display number of SA and RO completed RRI/family interviews.

System generated list of residents where a Resident Representative Interview was completed. The list is separated by SA and RO teams and includes the assigned surveyor.

Do you need to adjust the workload?

TC will enter a response to this question on the team meeting screen.

Are there concerns that are indicative of a system failure? Do you have enough information to validate that?

TC will enter a response to this question on the team meeting screen.

More ...

"Team Meeting" on page 47

Finalize Sample

Once the initial pool process has been completed for the LTCSP Comparative survey, the TC shares data with the team members. The process of finalizing the sample remains the same as any SA survey, but the screen provides different information and different system-selected rules apply.

The Facility Census Number displayed is the final number from the SA survey. The RO TC can change this number if the RO team determines the SA facility census number is inaccurate.

Once the RO TC starts sample finalization, the system pulls the five unnecessary meds residents from the SA survey and displays the list along with the reasons.

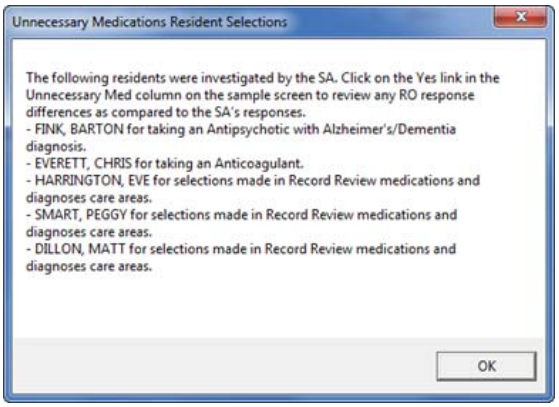


Figure 151: Unnecessary med resident selections from SA survey

View the MDS, SA, and any RO differences regarding an unnecessary medications resident:

1. Click the **Yes** link in the **Unnec. Meds** column.
2. Click **Close** when finished reviewing the notes.

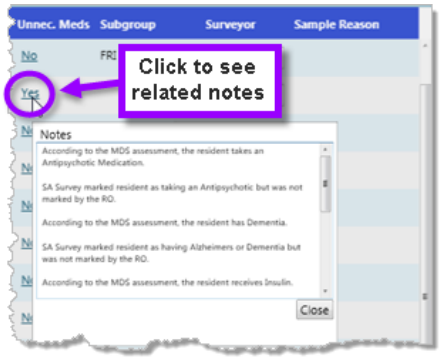


Figure 152: Unnecessary Med resident notes

The Finalize Sample screen includes additional information for the LTCSP Comparative:

- If an RO added a resident to the initial pool and indicated that the SA missed the resident, the RO team will see the label **SA Missed** in the **Missed Resident?** column. To review the RO's notes, click **SA Missed**.
- If the resident was included in the SA initial pool, **SA** appears in the **SA Initial Pool** column.

- If the resident was included in the SA sample, **Yes** appears in the **SA Sample** column.
- Expand a resident on either the by Care Area or by Resident screen and the care areas listed indicate if
  - The SA didn't mark that initial pool care area and the RO did and answered the extra question Yes (the issue was present during the SA survey)—**Missed FI**
  - Both SA and RO marked the initial pool care area as FI—**SA**
  - The SA did not miss the concern (RO marked FI and answered No for the extra question—the issue wasn't present during the SA survey)—no label
  - The SA did not include the resident in their initial pool and the RO answered Yes indicating the resident should have been included—**SA Missed**
  - The resident was a Complaint or FRI resident—**Comp**

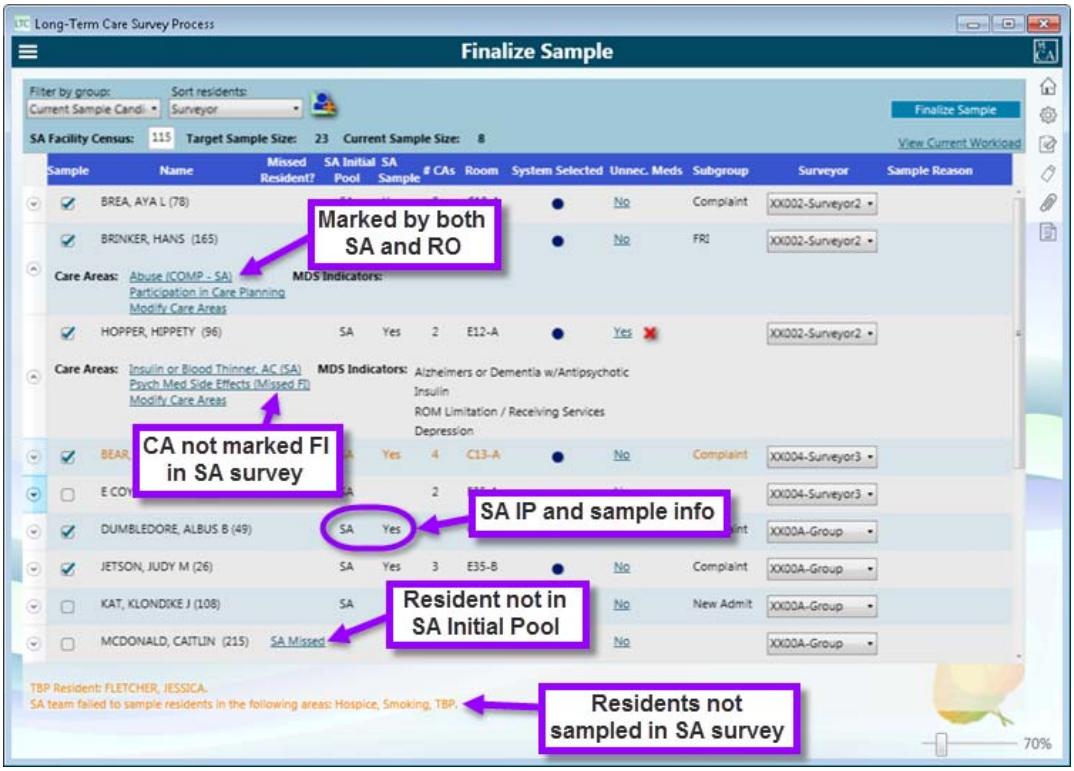


Figure 153: Sample finalization started in an LTCSP Comparative

Once the RO TC starts the sample finalization, the system selects certain residents for inclusion in the sample. The rules for the resident selections are different for the LTCSP Comparative:

- Any SA sampled resident who has at least one of the same FIs as the RO (to ensure ROs investigate the same areas as the SA).

- Any SA initial pool resident where the RO indicated an FI was present but missed during the SA survey (to ensure ROs investigate the areas missed by the SA).
- Any resident added to the initial pool that the RO indicated the SA should have included in the initial pool and there was at least one FI present during the SA survey (to ensure you investigate residents and concerns missed by the SA).
- Any resident that a surveyor marked as Include in Sample (i.e., harm or IJ), which is displayed under the Sample Reason column.
- Any identified abuse concern from the initial pool process.

If the SA failed to sample a qualified candidate for one of the required areas (e.g., dialysis, hospice, vent), a note at the bottom of the sample screen lists the areas.

TIP: If the RO TC starts sample finalization on the Finalize Sample screen too soon, press **Alt** + **U** to reactivate the Start Sample Finalization button. This only works for Start Sample Finalization; once the sample is finalized, it cannot be reset.

Complete finalizing the sample:

1. After reviewing the residents, select all the residents the RO team wishes to include in the sample.
2. Click the **Finalize Sample** button. Address any issues the system may display.

Once the sample is finalized,

- The Investigations screen lists all investigations including the SA's closed record residents (set filter to All Residents to view)
- Review and assign any facility tasks that were triggered from any applicable initial pool care areas marked by the RO team

More ...

"Finalize Sample" on page 92
"Start Sample Finalization" on page 99
"Complete Sample Finalization" on page 104
"Sample Finalization Tips" on page 201

Facility Tasks

The mandatory facility tasks remain the same for LTCSP Comparative surveys. Any triggered facility task associated initial pool care areas marked for a resident by an RO surveyor will trigger the facility task after sample finalization.

The only information for facility tasks that carries into the LTCSP Comparative are the residents in the following tasks as long as the SA included the resident names in the resident box on the applicable facility task screen:

- Beneficiary Protection Notification
- Dining (MDS residents only)
- Infection Control
- Resident Council
- Resident Assessment

The residents from the SA survey appear with an SA indicator. In all other tasks, only the RO team-selected residents appear.

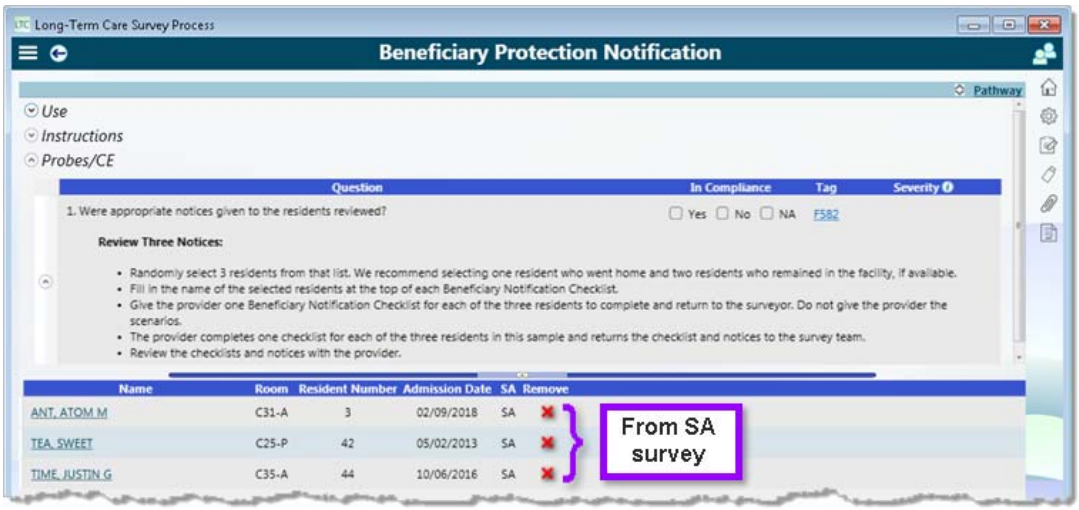


Figure 154: Example of residents from SA survey in Beneficiary Protection Notification

If the LTCSP Comparative includes a resident in a facility task that was included in the state survey, **SA** appears in the **SA** column on the resident list. Only the notes entered by the RO for that resident appear when you click the resident's name.

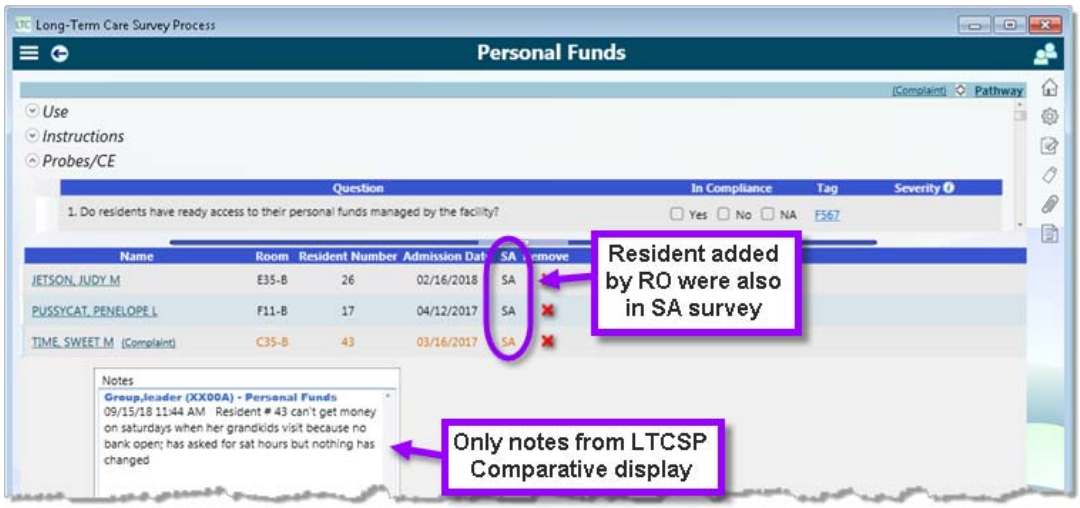


Figure 155: Residents in a facility task added in both SA and LTCSP Comparative surveys

More ...

"Facility Tasks" on page 109
"Mandatory Facility Tasks" on page 110
"Triggered Facility Tasks" on page 111
"Assign Facility Tasks" on page 113

Closed Record Sample

The same candidates sampled for closed record review in the SA survey are sampled in the LTCSP Comparative. They automatically appear on the Investigations screen (set filter to All Residents to see and assign) and there is no Closed Record Sample screen or any need to finalize this sample.

Investigations

The functionality remains the same as any SA survey for Investigations with the addition of the **SA** and **Missed FI** labels. These labels also appear next to the resident name in the investigation screens.

Figure 156: Investigation screen with SA indicators in an LTCSP Comparative

More ...

"Resident Investigations" on page 130
"Assign Investigations" on page 133

Potential Citations

The functionality remains the same as any SA survey for Potential Citations with the addition of the **SA** and **Missed FI** labels. If a resident or investigative area listed is associated with a complaint, you will also see the complaint label.

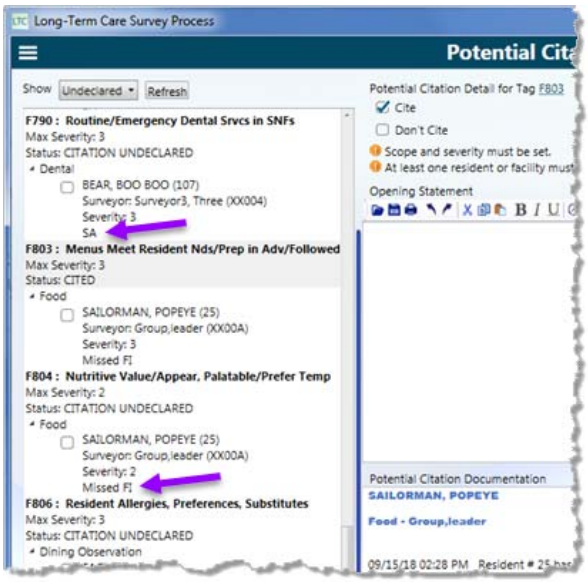


Figure 157: Potential Citations screen with SA and Missed FI labels

More ...

"Potential Citations" on page 148
"Load Cites" on page 156

Finishing the LTCSP Comparative

When the LTCSP Comparative is complete, the RO TC will upload the comparative survey into ARO as you usually do. Once the ROs have finalized the CMS-2567, the RO team can use the **Compare RO to SA Tags** window to consolidate team findings. The information that the system generates and that the RO team enters provides the data necessary to analyze the RO Comparative survey results.

RO team members should also print a special Federal Monitoring Survey report for LTCSP Comparative surveys that summarizes the SA's performances.

Compare RO to SA Tags

The Compare RO To SA Tags window provides a summary of differences between the SA and LTCSP Comparative surveys. RO surveyors can use this screen to evaluate the results of the comparative and review the findings with the SA.

The window lists all the tags that were cited on the CMS-2567 from either the SA or the RO survey and indicates

- If the tag was cited on the SA, RO, or both surveys
- The scope and severity from the CMS-2567, if cited

In the **Tag** column, find the first instance of a tag number, read across the row to see if the RO cited the tag on the CMS-2567. If **Yes**, they did cite the tag, the scope and severity appears in the **SS** column. Then read across to the see if the SA cited the tag on the SA CMS-2567, if **Yes**, they did cite the tag, the scope and severity appears in the **SS** column. Any associated residents are listed under the first instance of the tag number. These rows include the resident name, the investigative area, whether or not the resident was included on the potential citation screen for the RO, and whether or not the resident was included on the potential citation screen for the SA.

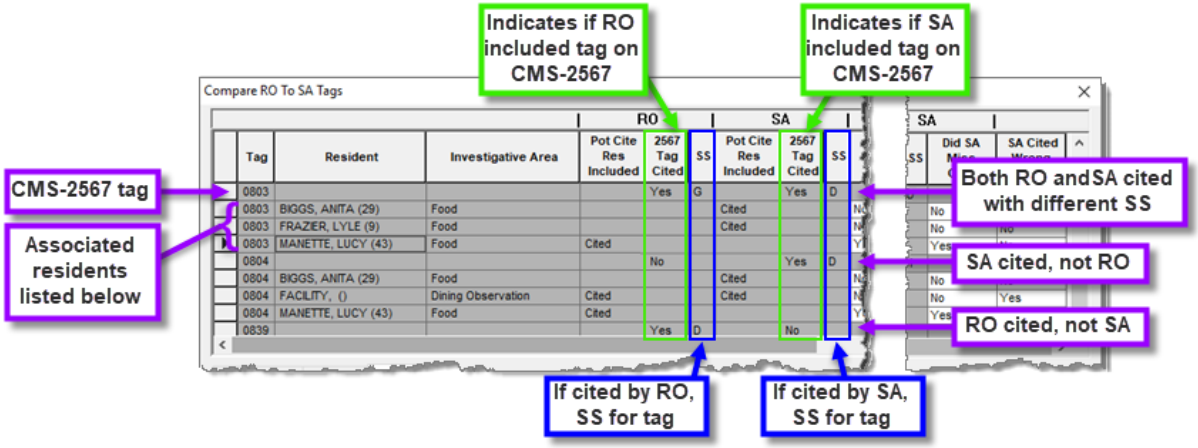


Figure 158: Compare RO To SA Tags window showing RO information vs SA information

Since the system does not record residents and investigative areas included in the CMS 2567, other than what is in the citation documentation, the RO needs to review the 2567 text for each tag and indicate if that resident and investigative area were covered by the SA in their documentation. ROs can use the **2567 - SA** tab to review the final documentation from the SA surveyors for the selected tag. The **2567 - RO** tab shows the final documentation from the LTCSP Comparative survey team members.

To access and use the Compare RO to SA Tags window:

1 In ARO, right-click the LTCSP Comparative survey in the Tree and select **FMS Citation Compare**.

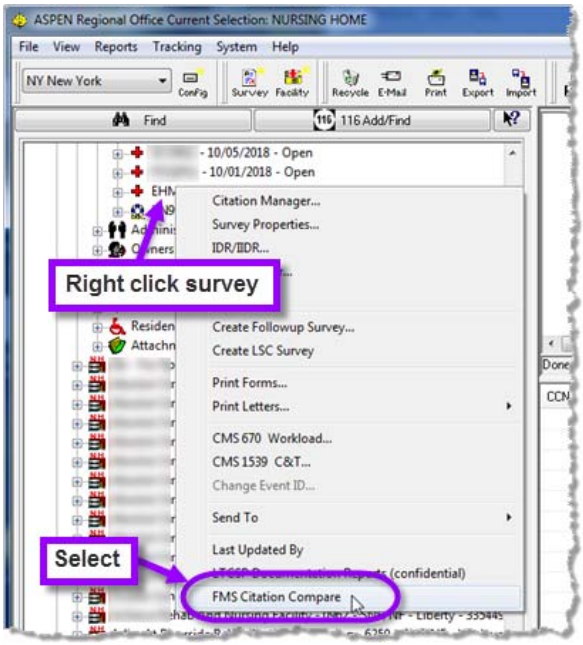


Figure 159: Right-click menu with the FMS Citation Compare option

2 In the **Compare RO to SA Tags** window:

- Compare citation information between the RO and SA surveys in the chart.
  - Click the **2567- SA** tab.
  - Click the tag number or name in the table to see SA documentation for the tag, if available.
- Select **Yes** or **No** to answer the question **Did SA Miss Cite?** for each resident or facility task listed.
- Select **Yes** or **No** to answer the question **SA Cited Wrong SS?** for each resident or facility task listed.
- Review 2567 information from the LTCSP Comparative on the **2567 - RO** tab.
  - Click the **2567- RO** tab.
  - Click the tag number or name in the table to see SA documentation for the tag, if available.
- Document your findings in the **Documentation** tab.

Note: If you do not have the ability to change the Yes/No answer in the last two columns, you do not have the proper menu security option set for this screen. Talk to your system administrator to add you to the proper option.

3 Click **Print** to create a report of everything listed on the table and the Documentation notes you entered.

4 Click **Done** when finished.

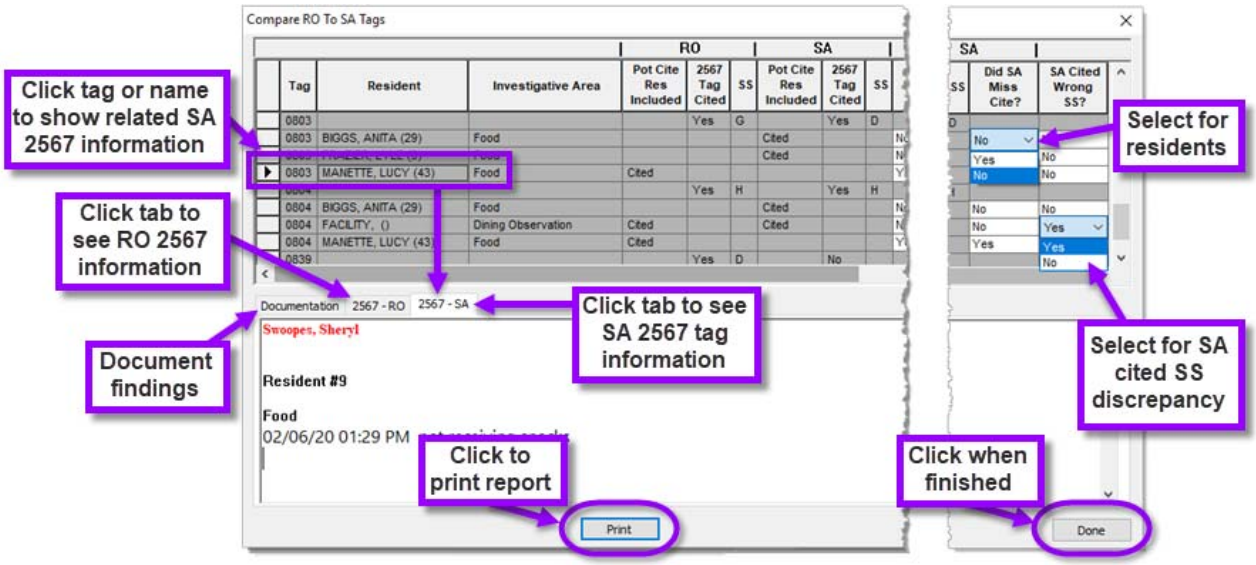


Figure 160: Compare RO to SA Tags window in ARO

Federal Monitoring Survey Documentation Report

This report lists the information from the LTCSP Comparative that summarizes the SA's onsite performance.

To print the Federal Monitoring Survey Documentation Report:

1 In ARO, right-click your survey in the tree and select **LTCSP Documentation Reports (confidential)**.

2 All reports are selected by default, click **De-select All** and then select the **Federal Monitoring Survey**.

3 Click **Print**. A PDF of the report opens.

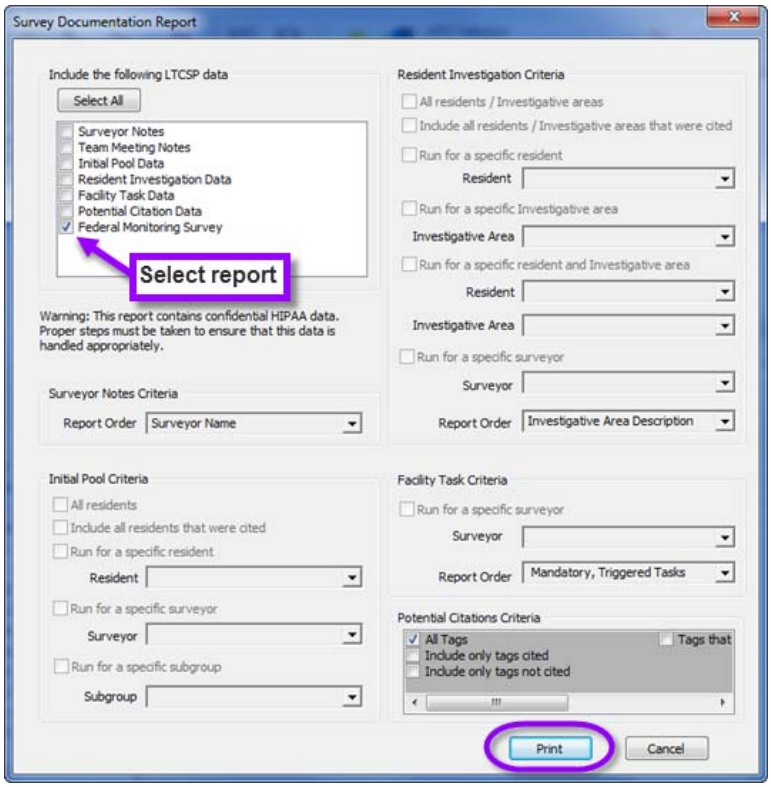


Figure 161: Survey Documentation Report dialog with the FMS report option

Federal Monitoring Survey Documentation Report

The report provides information from the LTCSP Comparative survey. The following lists the sections and questions that appear on the report along with an explanation of where the information comes from.

Initial Pool Results

1 ***Did the SA include five or fewer complaints/FRIs in the initial pool? If not, explain.***

A Yes/No response is calculated based on the number of complaint and FRIs in the SA survey. If the response is No the report will list all compliant and FRI residents in the SA team's initial pool.

2 ***Did the SA include a reasonable number of residents in the SA's initial pool—the SA didn't go considerable lower or higher than the recommended number?***

Populated with the responses to these questions on the RO Offsite Prep screen.

3 ***Did the SA inappropriately exclude offsite selected residents form the SA's initial pool? If so, did any of the excluded offsite selected residents result in a citation?***

A Yes/No response is calculated based on whether the SA survey team did not assign offsite selected residents and include them in the initial pool.

If the response is No, a list of all offsite residents that were not assigned is displayed. If a listed resident was included in a citation on the RO survey, the determination of whether the SA team missed the tag, entered by the RO on the FMS Citation Compare screen, will display.

4 ***Did the SA indicate an appropriate subgroup for all initial pool residents (e.g., subgroup wasn't left blank and you agreed with the designation)? If not, explain.***

A list of residents will be displayed if

- on the SA survey they were in the initial pool and a subgroup was not assigned
- the subgroup entered by the SA and the RO teams did not match

5 ***Where there any concerns with the SA's interview status designation? If so, explain.***

A list of residents will be displayed if there is a different between their interview status between the SA and RO survey. Discrepancies are displayed between interview statuses of interviewable and non-interviewable including whether the team conducted a resident representative interview.

6 ***Should the SA have included any resident(s) in the initial pool that they did not? If so, explain. Did the SA miss any citations because they neglected to include a resident in the initial pool?***

A Yes/No response is calculated based on whether the RO team added residents to their initial pool and indicated that the resident was missed by the SA team.

If the response is No, the system will list these residents, the reason the RO team provided when adding the resident to their initial pool and whether the resident was sampled by the RO team.

Also listed is the tag detail for any tags the RO team cited for these residents, including the determination of whether the SA team missed the tag, entered by the RO on the FMS Citation Compare screen.

7 ***Did the SA miss any concerns during the initial pool process (e.g. any FI missed by the SA)? Is so, explain. Did any of these concerns lead to a citation?***

A Yes/No response is calculated based on whether the RO team indicated a concern was present during the SA survey and the SA team did not identify the concern.

If the response is No, the report will list the following information:

- Resident name
- Interview type where FI was indicated
- Investigative area triggered by the FI response
- Care area marked as FI
- Whether the resident and investigative area was sampled by the RO
- Any tags that were cited on the RO team related to this resident and investigative area
- Whether the RO team selected the resident and investigative area to include in citation decision
- Determination of whether the SA team missed the tag, entered by the RO on the FMS Citation Compare screen
- Interview notes from the RO survey team for the missed FI

Sample Selection Results

8 Did the SA appropriately include residents in the sample to cover abuse, dialysis, hospice, ventilator, and transmission-based precautions, as appropriate? If not, explain. If an area wasn't covered by the SA, were any citations missed?

A Yes/No response is calculated based on whether the SA investigated at least one resident for the listed care areas if there were initial pool residents that qualified.

If the response is No, the system will list the area(s) that were not covered and all residents that had FI or NI responses therefore qualifying for investigation.

For the listed residents that were investigated on the RO survey, the report will indicate if any tags were marked as missed by the SA team on the FMS Citation Compare screen.

9 Based on the initial pool concerns identified by the SA, should the SA have included any other residents in the sample excluding the areas covered above (refer to the SA Investigation Report)? If so, explain. Did the SA miss any citations because they did not include other residents in the sample?

A Yes/No response is calculated based on whether the SA team did not investigate areas where there were one or more FIs marked during the initial pool process.

If the response is No, the report will list the missed investigative areas and candidate residents. The report will also indicate if the resident and investigative area was marked as being missed by the SA team on the FMS Citation Compare screen.

Investigation Results (CMS-2567 Review Separate)

10 Did the SA complete at least three RRI/family interviews? If no, was it feasible for the SA to have completed at least three RRI/family interviews (e.g., the RO team was able to complete the minimum with interviewees who visit daily)? Did any of the RO's additional RRI/family interviews result in a citation?

A Yes/No response is calculated based on whether the SA team did not have three completed resident representative interviews and the RO team did complete at least three.

The report also includes the information the RO team coordinator entered on the RRI question on the day 1 team meeting screen.

When the response is No, the system will list residents for whom the RO team was able to complete an RRI and indicate any investigative areas and tags that were missed in the SA survey for these residents based on the RO responses on the FMS Citation Compare Screen.

Facility Task Results

11 Did the SA remove a facility task that the RO team completed? Did the task result in a citation?

A Yes/No response is calculated based on whether the SA team removed a mandatory facility task that the RO team did not remove. If the response is No, the facility task ID and description will be listed along with the reason the SA team entered for removal.

The report will also indicate if the RO's investigation of the facility task was ever included as a reason to cite a tag in the LTCSP Potential Citation process and also if the tag ended up being cited on the RO's CMS-2567.

12 Did the SA team include the resident reviewed for facility task in the resident box on the task screen which is where the resident should be listed?

A Yes/No response is calculated based on whether the SA included one or more residents for Beneficiary Notice, Infection Control, and Resident Council. If the response is No, the facility task ID and description will be listed.

More ...

For more information on generating Survey Documentation Reports in ARO, refer to the ACO/ARO Procedures Guide posted at https://qtso.cms.gov/software/aspen/reference-manuals.

Supporting Materials

Tips, Troubleshooting, Quick Reference

Resident Manager Tips

The following table provides an overview of the things you can do when on the Resident List View or Resident Card View screens.

Area	Description
Subgroup	If Identified Concern is selected as the subgroup for a resident, then all other subgroups are disabled.
Initial Pool	Use the initial pool statuses to keep track of your residents.
Initial Pool	Statuses: Unknown =default Maybe = Those you may want to include in your pool after screening or to quickly identify unavailable residents Yes = Will be included in the initial pool; activates the interview/observations/record review screens No = Not included in the initial pool
Initial Pool—Offsite	Offsite selected residents automatically have an IP status of Yes; this status can only change to No if the resident is discharged. Maybe and Unknown IP statuses are not available for offsite selected residents.
Initial Pool	Complaint/FRI residents added to the initial pool in Offsite Prep automatically have an IP status of Yes.
Search	Cancel the search (click X in upper-right corner) in order to clear the results, and if the residents found in the search do not match your existing filter they will “disappear” when the search is canceled.
Search	Partial name searches do not work. Enter the full first, last name, or the room number.
Sort	Use sort order drop down; clicking columns does not sort.

Area	Description
Sort	Sort option not available in Card View. Sort will carry over from List View to Card View.
Sort	The room numbers listed for the residents come from the MDS data. There are no edits on this MDS field and the field is stored as an alpha character; for these reasons the sort may not work as expected or in a way that makes area assignments easier for the team.
Transfer Resident Data	Subgroup does not transfer to other residents.
Transfer Resident Data	After transfer, the Save and Cancel buttons on the Update Resident screen do not impact the transfer as the data is changed as soon as the user confirms the transfer.
Transfer Resident Data	Cannot transfer to a resident that has responses entered (FI, NI, notes).
Transfer Resident Data	Cannot transfer data to a resident assigned to another surveyor.
Transfer Resident Data	If you transfer data to an unassigned resident, the resident will automatically be assigned to you.
Update Resident	Updating a resident works differently on Card View and List View; in Card View click on the resident name and in List View use the Update Resident icon.
Update Resident	The subgroup type of Complaints and FRI are for formal complaints and facility-reported incidents that are being investigated during the survey. The information from ACTS is displayed on the offsite prep screen but there is no link to the resident so the subgroup should be updated for the complaint residents.
Update Resident	A resident unassigned in Card view appears on the resident list with no surveyor assignment.
Update Resident	Since the surveyor can determine the residents to be included in the initial pool other than offsite selected residents, they can be unassigned from a surveyor without providing a reason.
Update Resident	Since the survey team must include all offsite selected residents in the initial pool, they cannot be unassigned unless they have been discharged and the surveyors must enter the discharge reason.
Update Resident	When a new resident is added, they are not considered a new admission unless the subgroup is set to New Admissions.

Area	Description
Update Resident	You can discharge any resident but offsite selected residents require a reason for discharge. Discharging a resident removes the surveyor assignment and changes the IP status to No.
Add Resident	Any surveyor can add new admissions or other residents, as each surveyor is assigned a block of numbers that will be assigned to the added residents to ensure they are unique. Whenever you add a resident, that resident is automatically assigned to you.
Assignments	In List View you can assign multiple residents to a single surveyor by selecting all the checkboxes for each resident to be assigned, and then selecting the surveyor in the drop-down list for one of the selected residents.
General	The zoom slider changes the screen resolution.
General	When moving the cards to a folder in the Card View, click in the white space to drag the card; do not click the name.
General	The resident ID appears after the resident name and is generated by LTCSP for this survey and should be used for documentation.
General	Columns can be moved in the List view.

Interview Status

The following table explains the different interview statuses available. You can only select an interview status once the IP status has been set to Yes.

Interview Status	Actions for offsite selected residents
Interviewable	Conduct full interview, observations, and record review for resident.
Non-Interviewable	Resident Interview is marked Complete: Surveyor conducts only observations and limited record review. If possible surveyor conducts a resident representative interview (the Representative Interview option becomes active only when the interview status is non-interviewable).
Refused	Resident Interview is marked Complete: Surveyor conducts only observations and limited record review.

Interview Status	Actions for offsite selected residents
Unavailable for Interview	Resident Interview marked Complete: Surveyor conducts only observations and record review.
Out of Facility	Resident Interview and Observation marked Complete: Surveyor conducts only record review.

Interview and Observations Tips

The following table lists the different items you see on the Interview & Observations, Observations, and Record Review screens.

Area	Description
Initial Pool	The initial pool status must be set to Yes to complete the interview, observations, and record review screens.
Complete	You can manually set an interview, observation, or record review to Complete. *However*, if you make any changes on the screen after that, the system removes the completion checkmark.
MDS Discrepancy	Only care areas that are mapped to an MDS indicator have the MDS Discrepancy checkbox.
MDS Discrepancy	If the MDS indicator is set for a care area and No Issue is selected, the Resident Assessment facility task is triggered.
RI	Because observations are made during the interview; both interview and observation questions are combined on the interview screen.
RI	Completion status and orange exclamation point (FI required) on the Interview screen is based only on the interview questions, not on the observation questions.
RI	Probes are provided as guidelines for the interview and observations and the probes for the interview CAs only may be collapsed.
RI, RO	General care areas are listed in order with Quality of Life and Resident Rights first followed by Quality of Care.
RI, RO, RR	If another surveyor is assigned to a resident the interview screen will be read-only.
RI, RO, RR	If a resident is not assigned to a surveyor, once interview data is entered the resident will be automatically assigned to the surveyor.

Area	Description
RR	The Care Areas shown for Record Review are based on Interview Status, certain MDS indicators, and Subgroup of new admissions.
RR	Use Additional Care Areas drop-down to select CAs that may not be listed on the screen but are areas of concern identified during the record review.
Screen	The Collapse Completed Care Areas setting is a user setting that persists for an individual surveyor.
Screen	When set, the Collapse Completed Care Area only takes affect when a screen is first entered; the screen will not be collapsed while the user is entering data. Use the Collapse Now button to change the screen as it is being used.
Subgroup	Use the Subgroups to identify noted concerns. Note the Complaints subgroup is used for official complaints reported to the SA that are being investigated during the survey.
Transfer	Interview data can only be transferred to a resident that does not have any questions answered.
Transfer	Interview data cannot be transferred to a resident that is assigned to another surveyor.

Sample Finalization Tips

The following table lists and explains items on the Sample Finalization screen.

Area	Description
Care Area	Click a resident's care area to see the survey notes for that CA.
Care Area	The Sample by Care Area view of the screen is sorted by default on the number of Further Investigates/residents in a care area.
Care Area	If you check the box in the Function toolbar you can sort the care areas alphabetically instead.
Care Area	The Sample by Care Area view of the screen has a column that provides the number or Further Investigates for a care area and the number included in the sample.
Census	Census is editable and it changes target size appropriately.
Finalize	Once you finalize the sample, it cannot be adjusted.

Area	Description
Finalize	Finalize triggers the Personal Funds, Resident Assessment and Environment facility tasks.
Residents	Each resident can be expanded to view additional information, such as care areas.
Start Sample Finalization	Press Alt + U to undo Start Sample Finalization. The screen resets and the Start Sample Finalization button reactivates. When sample finalization is started again, all unnecessary meds candidates will be re-sampled. Note: This only works for Start Sample Finalization; once the sample is finalized, it cannot be reset.
Start Sample Finalization	Once you start the sample, the system preselects the following: Residents with Abuse as Further Investigate, IJ or Harm indicated residents and any offsite selected residents with Further Investigates in any care area.
Surveyor	The assignments made in Sample Finalization are for the resident. All investigations for that resident will be assigned to the same person initially. This can be adjusted during the investigations.
Surveyor	Default sort of the Sample by Resident screen is by Surveyor.

Facility Tasks Tips

The following table lists and explains items found on the main facility task screen as well as in the individual facility task screens.

Area	Description
Assignments	Facility task screens are read-only if you are not assigned to the task.
Assignments	Team coordinators can assign a task to any surveyor on the team while the team members can only assign tasks to themselves.
Initiation	Only tasks not already included for the survey can be initiated.
Initiation	If a task is removed it will show up as a task to be initiated in case the removal was done in error.
Med Admin	The Med Admin screen supports entry by keyboard or stylus. The information is stored only on the Med Admin screen, so any relevant investigation information must be entered into the facility task Notes field.

Area	Description
Screen Sizing	Since the pathways are large, the facility screens allow users to change the amount of space each section takes and with a single click, expand a section to the whole screen.
Residents	Not all facility tasks have the ability to add residents.
Residents	Some facility tasks will have residents display based on MDS or Interview data. Clicking on the resident's name will show the relevant interview notes.
Show All Surveyors	When Show Answers for: is set to All Surveyors after data sharing, the screen will be read-only and the most severe response from all surveyors completing the facility task will be displayed.
Error Rate	The error rate calculation on the Medication Administration and Med Admin screens reflects the individual surveyor's observed error rate. To generate the overall (team) error rate, a designated surveyor assigned to the task can enter Total Number of Errors and Opportunities for Errors for all team members. After sharing data, run the Facility Tasks report to see the combined (team) observed error rate.
Tags	If a facility task has a critical element questions that is associated with multiple tags, the tag link will be replaced with a Select link allowing the user to select the appropriate tag(s).

Non-mandatory Facility Task Triggers

The following table explains what triggers then non-mandatory tasks.

Triggered Task	Triggered by Care Area	Source Screen
Environment	Accommodation of Needs Environment Call Lights	RI, RRI, RO RI, RRI, RO RO
Personal Funds	Personal Funds	RI, RRI
Resident Assessment	MDS discrepancy with no associated Further Investigate. A resident with no MDS assessment within the last 120 days.	RI, RRI, RO, RR

Resident Investigations Tips

The following table lists and explains items found on the main Investigation screen as well as the individual investigation screens.

Area	Description
Assignments	The TC can assign or unassign investigations to any team member but the team members can only assign or unassign to themselves.
Assignments	On the investigations list you can make assignments on the resident and investigation level. Prior steps assigned only at the resident level.
Filter	The default filter on the investigations list is My Investigations.
Initiate	You can initiate an investigation at any time during the survey.
Initiate	When initiating an investigative area, any investigative areas already assigned to the selected resident will not appear in the drop down list.
Initiate	When an investigative area is initiated it is automatically assigned to the initiator.
Initiate	System does support initiating tags; the investigative area of FTag Initiation is used. On the investigation screen, the select link is then used to search for and select the tags to be initiated.
Investigations list	The Inv. Reason column on the Investigations screen displays the care area that triggered this investigation.
Investigations list	When you have completed an investigation, the completion status shows on the investigations list, but you will not see an orange exclamation point if a response is No.
Investigations list	Sample Finalization and Closed Record Review populate the Investigations screen. It will be blank until those steps have been performed.
Pathway	There are two ways to access the investigative pathways: 1. Clicking on the resident name will bring up the investigation screens and allow you to switch between investigative areas for the selected resident. 2. Clicking on the investigative area will bring up the investigation screens and allow you to switch between residents for the selected investigative area.
Pathway	Full pathway documents are available and will be displayed in a separate window.

Area	Description
Remove	Only the TC can remove an investigation.
Screen view	The pull out menu on the investigation page differs depending on which item is selected.
Screen view	Clicking the expand icon in the Expander bar brings that section of the investigation screen to the top of the screen.
Screen view	When Show Answers for: is set to All Surveyors after data sharing, the screen will be read-only and the compliance decision will be set to the most severe value entered by any surveyor conducting this investigation.
Transfer Investigation Answers	When transferring investigative data to another resident, you can only select residents that are also being investigated for the same area and that have no responses entered.
Transfer Investigation Answers	Transferring investigative data to another resident transfers only CE answers, not the investigative or resident notes.

Potential Citations Tips

When the team finishes with their investigations and facility tasks, the team coordinator uses the Potential Citation screen to mark all tags listed as cited or not cited.

Area	Description
Display	A tag must be selected before the Citation Determination pane is populated.
Tag tree	All tags where a non-compliance decision was made during investigations or facility tasks.
Tag tree	A tag will not show Cited or Not Cited until all the instructions have been completed. The instructions appear beneath the citation information.
Tag tree	**All**—Shows all tags marked for potential citation during the survey **Cited**—Shows only those tags that have been cited. **Not Cited**—Shows only those tags that have not been cited. **Undeclared**—Shows only those tags that have not been marked as Cited or Not Cited.

Area	Description
Display	Screen is read-only for team members, only the TC enters the citation decisions for the team.
Tags	All team members should share data with the TC before beginning Potential Citations.

Citation Determination Tips

The following table covers the Cite and Don’t Cite options on the Potential Citations screen.

Citation	Action
Cite	Provide Scope and Severity (S/S) Follow remaining instructions
Don't Cite	Select one of the following Reasons: • Move to another tag • Facility provided additional information • Evidence did not support deficient practice • Medication error rate less than 5% • Separate entity investigating or citing • Marked in error • Other, explain

MDS Indicators

The following table lists the MDS Indicators that may be associated with residents and that appear in the Resident Manager screens (RI, RO, RR).

Indicator	Description
1	Alz/Dem w/Antipsych (Alzheimer's or Dementia w/Antipsychotic)
2	AC (Anticoagulant without Internal Bleeding)
3	AC w/Bleed (Anticoagulant with Internal Bleeding)
4	Cath (Catheter without UTI)
5	Cath w/UTI (Catheter with UTI)
6	ADLs (Decline in Late-Loss ADLs: bed mobility, transfer, eating, toilet)
7	Dehydration

Indicator	Description
8	Depression
9	Dialysis
10	Fall Maj Inj (Fall(s) with Major Injury)
11	Hospice
12	Insulin
13	Bowel & Bladder (Low-Risk Residents)
14	Const Pain (Pain Almost Constantly)
15	Freq Pain (Frequent Pain)
16	No PASARR II w/Dx (No PASARR II w/MD Dx, ID Dx or Related Condition)
19	Restraint(s)
20	Ltd ROM (ROM Limitation / Receiving Services)
21	Ltd ROM w/o Svs (ROM Limitation / NOT Receiving Services)
22	Trach (Tracheostomy)
23	TF (Tube Feeding/NO Dehydration/NO Wt Loss)
24	TF w/Wt loss/Dehydration (Tube Feeding with Dehydration and/or Wt Loss)
25	4+ Rehosp (Four (4) or More Unplanned Re-Hospitalizations)
26	2-3 Rehosp (Two (2) or Three (3) Unplanned Re-Hospitalizations)
27	1 Rehosp (One (1) Unplanned Re-Hospitalization)
28	Wt loss (Unplanned Weight Loss)
29	UTI
30	Vent (Ventilator)
31	Maj Infection (Major Infections)
32	Wandering
33	New or Worsened PU (New or Worsened Pressure Ulcer)
34	S3 or S4 PU (Presence of Stage 3 or 4 Pressure Ulcer)

Care Area to RI/RO/RR Mapping

The following table shows which screen(s) a care area appears on and if any specific MDS indicators are linked to that care area.

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Choices	Yes	Yes	No	N/A	N/A
Activities	Yes	Yes	Yes	N/A	N/A
Dignity	Yes	Yes	Yes	N/A	N/A
Abuse	Yes	Yes	Yes	N/A	N/A
Resident-to-Resident Interaction	Yes	Yes	No	N/A	N/A
Privacy	Yes	Yes	Yes	N/A	N/A
Accommodation of Needs (physical)	Yes	Yes	Yes	N/A	N/A
Personal Funds	Yes	Yes	No	N/A	N/A
Personal Property	Yes	Yes	No	N/A	N/A
Sufficient Staffing	Yes	Yes	No	N/A	N/A
Participation in Care Planning	Yes	Yes	No	N/A	N/A
Discharge	Yes	Yes	No	N/A	N/A
Environment	Yes	Yes	Yes	N/A	N/A
Food	Yes	Yes	No	N/A	N/A
Dental	Yes	Yes	Yes	N/A	N/A
Nutrition	Yes	Yes	Yes	RR8 - All residents marked with an interview status other than Interviewable that do not have a MR MDS marked as terminal Nutrition is required.	24-Tube Feeding with Weight Loss or Dehydration, 28-Unplanned Weight Loss

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Hydration	Yes	Yes	Yes	N/A	7-Dehydration, 24-Tube Feeding with Weight Loss or Dehydration
Tube Feeding	Yes	Yes	Yes	N/A	23-Tube Feeding w/o Weight Loss or Dehydration, 24-Tube Feeding with Weight Loss or Dehydration
Vision and Hearing	Yes	Yes	Yes	N/A	N/A
ADLs	Yes	Yes	Yes	N/A	N/A
ADL Decline	Yes	Yes	No	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	6-Decline in Late-Loss ADLs
Catheter	Yes	Yes	Yes	N/A	4-Catheter Use w/o UTI, 5-Catheter Use and UTI
Insulin or Blood Thinner	Yes	Yes	No	N/A	2-Anticoagulant Drug Use w/o Bleeding, 3-Anticoagulant Drug Use with Bleeding, 12-Insulin

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Insulin	No	No	No	RR6- All residents that are observed; the record review categories for Insulin is required only if the associated indicators are present.	12-Insulin
Anticoagulant	No	No	No	RR5- All residents that are observed; the record review categories for AC is required only if the associated indicators are present.	2-Anticoagulant Drug Use w/o Bleeding, 3-Anticoagulant Drug Use with Bleeding
Urinary Tract Infection (UTI)	Yes	Yes	Yes	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	5-Catheter Use and UTI, 29-UTI, 31-Major Infections
Respiratory Infection	Yes	Yes	Yes	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	31 - Major Infections

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Infections (not UTI or Respiratory)	Yes	Yes	Yes	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	31 - Major Infections
Hospitalizations	Yes	Yes	No	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	25-4-more Unplanned Rehospitalization, 26-2-3 Unplanned Rehospitalization, 27-1 Unplanned Rehospitalization
Falls	Yes	Yes	Yes	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	10-Fall(s) with Major Injury
Pain	Yes	Yes	Yes	N/A	14-Almost Constant Pain, 15-Frequent Pain

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Pressure Ulcers	Yes	Yes	Yes	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	33-New or Worsened Pressure Ulcer, 34-Presence of Stage 3 or 4 Pressure Ulcer
Skin Conditions (non-pressure related)	Yes	Yes	Yes	N/A	N/A
Limited ROM	Yes	Yes	Yes	N/A	20-Limited ROM with Services, 21-Limited ROM w/o Services
Rehab	Yes	Yes	No	N/A	21-Limited ROM w/o Services
Dialysis	Yes	Yes	No	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	9-Dialysis
B&B Incontinence	Yes	Yes	Yes	RR1 - Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	13-Low-Risk B&B

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
Constipation/ Diarrhea	Yes	Yes	No	N/A	N/A
Smoking	Yes	Yes	Yes	N/A	N/A
Hospice	Yes	Yes	Yes	RR4- All residents marked as New Admissions; additional record review categories for high risk meds are required.	11-Hospice
Notification of Change	No	Yes	No	N/A	N/A
Language/ Communication	No	No	Yes	N/A	N/A
Mood/Behavior	No	No	Yes	N/A	8-Depression, 32-Wandering
Restraints	No	No	Yes	N/A	19-Restraint(s)
Accident Hazards	No	No	Yes	N/A	19-Restraint(s), 32-Wandering
Unsafe Wandering/ Elopement	No	No	Yes	Unsafe Wandering/ Elopement	32-Wandering
Call Light in Reach, Call System Functioning	No	No	Yes	N/A	N/A
Edema	No	No	Yes	N/A	N/A
Psych Med Side Effects	No	No	Yes	N/A	1-Alzheimer's/ Dementia with Antipsychotic Drug Use
Psych/Opioid Med Side Effects	No	No	Yes	N/A	1-Alzheimer's/ Dementia with Antipsychotic Drug Use

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
AC Med Side Effects	No	No	Yes	N/A	2-Anticoagulant Drug Use w/o Bleeding, 3-Anticoagulant Drug Use with Bleeding
Oxygen	No	No	Yes	N/A	N/A
Positioning	No	No	Yes	N/A	N/A
Ventilator/ Tracheostomy	No	No	Yes	N/A	22-Tracheostomy, 30-Ventilator
Change of Condition	No	No	No	RR1- Any resident marked with an interview status other than Interviewable; additional record review categories are required regardless of the MDS indicator status.	N/A
Antipsychotic with Alzheimer's or Dementia	No	No	No	RR2- All residents that are observed; the record review category of Alzheimer/Dementia with Antipsychotic is required only if the associated indicator is present.	1-Alzheimer's/ Dementia with Antipsychotic Drug Use
PASARR	No	No	No	RR7- All residents that are observed; the record review categories for PASARR is required only if the associated indicators are present and the facility is not a SNF only facility.	16-No PASARR II w/Diagnoses

Care Area	RI	RRI	RO	RR	Associated MDS Indicator
High Risk Meds	No	No	No	RR4- All residents marked as New Admissions; additional record review categories for high risk meds are required.	N/A
Diagnoses	No	No	No	RR4- All residents marked as New Admissions; additional record review categories for high risk meds are required.	N/A
Advance Directives	No	No	No	RR3- All residents that are part of the initial pool; the record review categories of Advanced Directives and Other are required.	N/A
Other Concerns	Yes	Yes	Yes	RR3- All residents that are part of the initial pool; the record review categories of Advanced Directives and Other are required.	N/A

Record Review Rules

Record review categories vary depending on a resident's MDS indicators, interview status, and subgroup. New Admissions have a full list of care areas for record review since they have no MDS data. This table lists the other rules determining which care areas appear on the Record Review screen.

Rule ID	Description
RR1-	Any resident marked with an interview status other than Interviewable will have additional record review categories regardless of their MDS indicators.
RR2-	All residents in the initial pool will have the record review category of Alzheimer/Dementia with Antipsychotic if the associated MDS indicator is present.
RR3-	All residents in the initial pool will have the record review categories of Advanced Directives and Other.
RR4-	All residents marked as New Admission will have the record review category of High Risk Meds.
RR5-	All residents in the initial pool will have the record review category of AC Med Side Effects only if the associated MDS indicators are present.
RR6-	All residents in the initial pool will have the record review category of Insulin only if the associated MDS indicator is present.
RR7-	All residents in the initial pool will have the record review category of PASARR only if the associated MDS indicator is present and the facility is not a SNF only facility.
RR8-	All residents marked with an interview status other than Interviewable will have the record review category of Nutrition *unless* their Most Recent MDS assessment is marked as Terminal.
CommDischarge1	All residents being interviewed, the Discharge question is required if the resident is marked as a new admission or the most recent MDS assessment is not marked as Q0500B or Q0550A.
NoIntStatus	If the interview status is not set for a resident, RO categories appear on the Interview and Observations and Observations screens; Advance Directives and Other Concerns appear on the RR screen.
NoIntStatusNewAdmit	If the interview status is not set for a new admission, RO categories appear on the Interview and Observations and Observations screens; Advance Directives and Other Concerns appear on the RR screen.

Care Area to Investigative Area Mapping

The following table lists the care areas found in the Resident Manager screens (RI, RRI, RO, RR) and the investigation associations with pathways or facility tasks for each care area.

Care Area	Associated Pathway	Triggered Facility Task	If No Pathway, Associated Tag(s)
Choices	N/A	N/A	F561
Activities	Activities	N/A	N/A
Dignity	N/A	N/A	F550
Abuse	Abuse	N/A	N/A
Resident-to-Resident Interaction	Abuse & Accidents	N/A	N/A
Privacy	N/A	N/A	F583
Accommodation of Needs (physical)	N/A	Environment	N/A
Personal Funds	N/A	Personal Funds	N/A
Personal Property	N/A	N/A	F584
Sufficient Staffing	Sufficient and Competent Staffing	N/A	N/A
Participation in Care Planning	N/A	N/A	F657
Discharge	Discharge	N/A	N/A
Environment	N/A	Environment	N/A
Food	N/A	N/A	F803, F804
Dental	Dental	N/A	N/A
Nutrition	Nutrition	N/A	N/A
Hydration	Hydration	N/A	N/A
Tube Feeding	Tube Feeding	N/A	N/A
Vision and Hearing	Communication & Sensory	N/A	N/A
ADLs	ADL	N/A	N/A
ADL Decline	ADL	N/A	N/A
Catheter	Catheter/UTI	N/A	N/A

Care Area	Associated Pathway	Triggered Facility Task	If No Pathway, Associated Tag(s)
Insulin or Blood Thinner	Unnecessary Meds (if selected as 1 of 5)	N/A	N/A
Insulin or Blood Thinner	Unnecessary Meds (if *not* selected as 1 of 5)	N/A	RI or RRI Only: F684, F756, and F757 if not one of the 5 but marked as FI for a sampled resident
Urinary Tract Infections (UTI)	Catheter/UTI	N/A	N/A
Respiratory Infections	Respiratory	N/A	N/A
Infections (not UTI or Respiratory)	N/A	N/A	F880
Hospitalizations	Hospitalization	N/A	N/A
Falls	Accidents	N/A	N/A
Pain	Pain	N/A	N/A
Pressure Ulcers	Pressure Ulcers	N/A	N/A
Skin Conditions (non-pressure related)	General	N/A	N/A
Limited ROM	Positioning/Mobility/ ROM	N/A	N/A
Rehab	Rehab & Restorative	N/A	N/A
Dialysis	Dialysis & Nutrition	N/A	N/A
B&B Incontinence	B&B	N/A	N/A
Constipation/ Diarrhea	General	N/A	N/A
Smoking	Accidents	N/A	N/A
Hospice	Hospice	N/A	N/A
Notification of Change	N/A	N/A	F580
Language/ Communication	Communication & sensory	N/A	N/A

Care Area	Associated Pathway	Triggered Facility Task	If No Pathway, Associated Tag(s)
Mood/Behavior	Behavioral-Emotional	N/A	N/A
Restraints	Restraints	N/A	N/A
Accident Hazards	Accidents	N/A	N/A
Elopement	Accidents	N/A	N/A
Call Lights	N/A	Environment	N/A
Edema	General	N/A	N/A
Med SE Part 1	Unnecessary Meds (if selected as 1 of 5)	N/A	F675, F684, F756, and F758 if not one of the 5 but marked as FI for a sampled resident
Med SE Part 2	Unnecessary Meds (if selected as 1 of 5)	N/A	F675, F684, F756, F757, and F758 if not one of the 5 but marked as FI for a sampled resident
Med SE Part 3	Unnecessary Meds (if selected as 1 of 5)	N/A	F675, F684, F756, and F757 if not one of the 5 but marked as FI for a sampled resident
Oxygen	Respiratory	N/A	N/A
Positioning	Positioning/Mobility/ROM	N/A	N/A
Vent/Trach	Respiratory	N/A	N/A
Change of Condition	N/A	N/A	F684
Antipsychotic with Alzheimer's or Dementia	Unnecessary Meds & Dementia (if selected as one of 5)	N/A	N/A
Advance Directives	N/A	N/A	F578
PASARR	PASARR	N/A	N/A

Data Sharing Checklists

Data can be shared using any of the following methods:

- USB drive
- Over wired network connection
- Over wireless network connection

Checklist for Using USB Drive

Check	Item
☐	Verify all laptops have enabled USB port.
☐	Verify all surveyors have compatible encryption.
☐	If RO is participating, ensure RO's computer can read the State Agency's memory stick and vice versa. For more information, see Procedure: “RO/CO Data Share Using USB/File” on page 44.
☐	Verify survey team has USB drives including an extra in case the first one dies.

Checklist for Using Wired Network

Check	Item
☐	Verify all surveyors are trained in how to use the router and connect the computers.
☐	Verify all laptops have enabled and working network ports or dongles.
☐	Verify team has router and cables.
☐	Verify all laptops have firewall ports open in Microsoft Firewall:
	☐ TCP: 910, 2638
	☐ UDP: 901, 2638
☐	Verify all laptops have firewall ports open in third party security application:
	☐ TCP: 910, 2638
	☐ UDP: 901, 2638
☐	If an RO is participating, confirm RO's computer has firewall ports open.
☐	Verify surveyor connectivity to router and other laptops before leaving facility.
☐	For backup plan, refer to "Checklist for Using USB Drive" on page 220.

Checklist for Using Wireless Network

Check	Item
☐	Verify all surveyors are trained in how to use the router.
☐	Verify all surveyors know how to create a new wireless network connection (or preconfigure all laptops for the router SSID and password).
☐	Verify all laptops have enabled and working wireless adapters.
☐	Verify team has router with WPA2.
☐	Verify team knows the router SSID and password.
☐	Verify all laptops have firewall ports open in Microsoft Firewall:
	☐ TCP: 910, 2638
	☐ UDP: 9012, 2638
☐	Verify all laptops have firewall ports open in third party security application:
	☐ TCP: 910, 2638
	☐ UDP: 9012, 2638
☐	If an RO is participating, confirm RO's computer has firewall ports open.
☐	Verify surveyor connectivity to router and other laptops before leaving facility.
☐	For backup plan, refer to "Checklist for Using USB Drive" on page 220.

Keyboard Shortcuts

Windows keyboard shortcuts are combinations of two or more keys that, when pressed, can perform the same task as using a mouse or other pointing device.

Ease of Access Keyboard Shortcuts

To do this	Press this
Turn Filter Keys on and off	Right Shift for eight seconds
Turn High Contrast on or off	Left Alt + Left Shift + Prtscn (Print Screen)
Turn Mouse Keys on or off	Left Alt + Left Shift + Num Lock
Turn Sticky Keys on or off	Shift five times
Turn Toggle Keys on or off	Num Lock for five seconds
Open the Ease of Access Center	Windows log key + u

Additional Ease of Access / Navigation Keyboard Shortcuts

To do this	Press this
Interview/Observations/Record Review probes Collapse Now (and set check if box is unset), so you can collapse sections without tabbing down through entire page.	Alt + C
Skip pull out menu for Interview/Observations/Record Review and Investigations screens in tab sequence. So you don't have to tab through each item every time to get to other elements on the screen.	Alt + K
Insert Resident ID in Surveyor Notes or a notes field	Alt + R
Open Weight Calculator	When not in a notes field or Surveyor notes, Alt + R
Insert Date and Time stamp in Surveyor Notes or a notes field	Alt + T
Reset Start Finalization	Alt + U
Increase screen size	Ctrl + "+" (plus sign)
Decrease screen size	Ctrl + "–" (minus sign)

Quick Access Menu Shortcuts

Icon	To do this	Click icon or press this
	Include attachments	Alt + A
	Transfer data	Alt + D
	Return Home	Alt + H
	Enter or access notes	Alt + N
	Access reports	Alt + P
	Access setting	Alt + S

Notes Menu Bar

Icon	To do this	Click icon or press this
	Open or create a new file	Ctrl + O
	Save a file	Ctrl + PS
	Print	Ctrl + P
	Undo	Ctrl + Z
	Redo	Ctrl + Y
	Cut text	Ctrl + X

Icon	To do this	Click icon or press this
	Copy text	Ctrl + C
	Paste text	Ctrl + V
B	Toggle bold	Ctrl + B
I	Toggle italics	Ctrl + I
U	Toggle underline	Ctrl + U
	Toggle highlighter	Ctrl + H
	Insert time stamp	Alt + T
	Access residents list	Alt + R
hx	Show History Surveyor Notes, Facility Task, and Investigation Notes	Surveyor Notepad and Investigation Notes
	Paste Weight Calculation RR/RRI, RO, RR and Nutrition Investigation only	Alt + W
	Paste Med Admin Rate Medication Administration Facility Task only	Alt + M

Surveyor Notes and Note Fields Shortcuts

To do this	Press this
Access residents list / Insert resident ID	Alt + R
Align Center	Ctrl + E
Justify text	Ctrl + J
Align text left	Ctrl + L
Align text right	Ctrl + R
Backspace	Backspace
Correct spelling error	no default key gesture
Decrease font size	Ctrl + [
Decrease indentation	Ctrl + Shift + Y
Delete	Delete
Delete next word	Ctrl + Delete
Delete previous word	Ctrl + Backspace
Enter line break	Shift + Enter
Enter paragraph break	Enter
Ignore spelling error	no default key gesture
Increase font size	Ctrl +]
Increase indentation	Ctrl + T
Insert time stamp	Alt + T
Move down by line	Down
Move down by page	PageDown
Move down by paragraph	Ctrl + Down
Move left by a character	Left
Move left by a word	Ctrl + Left
Move right by a character	Right
Move right by a word	Ctrl + Right
Move to end of document	Ctrl + End
Move to start of document	Ctrl + Home
Move to end of line	End

To do this (Continued)	Press this
Move the start of line	Home
Move up by a line	Up
Move up by a page	PageUp
Move up by a paragraph	Ctrl + Up
Select down by a line	Shift + Down
Select down by a page	Shift + PageDown
Select down by a paragraph	Ctrl + Shift +Down
Select left by a character	Shift + Left
Select left by a word	Ctrl + Shift + Left
Select right by a character	Shift + Right
Select right by a word	Ctrl + Shift + Right
Select to end of document	Ctrl + Shift + End
Select to start of document	Ctrl + Shift + Home
Select to end of line	Shift + End
Select to start of line	Shift + Home
Select up by line	Shift + Up
Select up by page	Shift + PageUp
Select up by paragraph	Ctrl + Shift + Up
Tab backward	Shift + Tab
Tab forward	Tab
Toggle bold	Ctrl + B
Toggle bullets	Ctrl + Shift + L
Toggle insert	Insert
Toggle italics	Ctrl + I
Toggle numbering	Ctrl + Shift + N
Toggle subscript	Ctrl + Plus (+)
Toggle superscript	Ctrl + Shift + Plus (+)
Toggle underline	Ctrl + U

General keyboard shortcuts

To do this	Press this
Copy the selected item	Ctrl + c (or Ctrl + Insert)
Cut the selected item	Ctrl + x
Paste the selected item	Ctrl + v (or Shift + Insert)
Undo an action	Ctrl + z
Redo an action	Ctrl + y
Delete the selected item and move it to the Recycle Bin	Delete (or Ctrl + D)
Delete the selected item without moving it to the Recycle Bin first	Shift + Delete
Edit/Rename the selected item	F2
Move the cursor to the beginning of the next word	Ctrl + Right Arrow
Move the cursor to the beginning of the previous word	Ctrl + Left Arrow
Move the cursor to the beginning of the next paragraph	Ctrl + Down Arrow
Move the cursor to the beginning of the previous paragraph	Ctrl + Up Arrow
Select a block of text	Ctrl + Shift with an arrow key
Select more than one item in a window or on the desktop, or select text within a document	Shift with any arrow key
Select multiple individual items in a window or on the desktop	Ctrl with any arrow key + Spacebar
Select all items in a document or window	Ctrl + A
Search for a file or folder	F3
Open the file menu for the active window	Alt + F
Display properties for the selected item	Alt + Enter
Close the active item, or exit the active program	Alt + F4
Open the shortcut menu for the active window	Alt + Space bar

To do this (Continued)	Press this
Activate the current grid row	Ctrl + Spacebar
Close the active document (in programs that allow you to have multiple documents open simultaneously)	Ctrl + F4
Switch between open items	Alt + Tab
Use the arrow keys to switch between open items	Ctrl + Alt + Tab
Change the size of icons on the desktop	Ctrl + Mouse scroll wheel
Cycle through programs on the task bar by using Aero Flip 3-D	Windows logo key + Tab
Use the arrow keys to cycle through programs on the task bar by using Aero Flip 3-D	Ctrl + Windows logo key + Tab
Cycle through items in the order in which they were opened	Alt + Esc
Cycle through screen elements in a window or on the desktop	F6
Display the address bar list in Windows Explorer	F4
Display the shortcut menu for the selected item	Shift + F10
Open the Start menu	Ctrl + Esc
Display the corresponding menu	Alt + underlined letter
Perform the menu command (or other underlined command)	Underlined letter
Activate the menu bar in the active program	F10
Open the next menu to the right, or open a sub-menu	Right Arrow
Open the next menu to the left, or close a sub-menu	Left Arrow
Refresh the active window	F5 (or Ctrl + r)
View the folder one level up in Windows Explorer	Alt + Up Arrow
Cancel the current task	Esc
Open Task Manager	Ctrl + Shift + Esc

To do this (Continued)	Press this
When CD is inserted, prevent it from automatically playing	Shift
Switch the input language when multiple input languages are enabled	Left Alt + Shift
Switch the keyboard layout when multiple keyboard layouts are enabled	Ctrl + Shift
Change the reading direction of text in right-to-left reading languages	Right or Left Ctrl + Shift

Dialog Box Keyboard Shortcuts

To do this	Press this
Move forward through tabs	Ctrl + Tab
Move back through tabs	Ctrl + Shift + Tab
Move forward through options	Tab
Move back through options	Shift + Tab
Perform the command (or select the option) that goes with that letter	Alt + underlined letter
Replaces clicking the mouse for many selected commands	Enter
Select or clear the checkbox if the active option is a checkbox	Space bar
Select a button if the active option is a group of option buttons	Arrow keys
Display Help	F1
Display the items in the active/drop-down list	F4
Open a folder one level up if a folder is selected in the Save As or Open dialog box	Backspace